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ABSTRACT

The problem of families' limited access to community early childhood services and information was addressed in this practicum. Negative outcomes for young children and their families in a northeastern city were attributed to difficulties in locating and providing services for the developmental needs of children between birth and age 5. The children were at risk for (1) substandard care; (2) abuse, neglect, or heightened family stress; and (3) school failure. The practicum aimed to help families negotiate services through a community-based referral procedure that used a "warm line" format. A key feature of the procedure was the outreach method, which used informal kinship and friendship networks, formal networks, and conventional public service announcements. The pluralistic nature of the community demanded diverse, holistic strategies. Outreach, coordination, and human resource development were other features of the implementation. The results were positive. Difficult-to-reach families responded to the outreach, received information, and shared it in their informal networks. Planning efforts that represented community needs were initiated. Eighty requests were processed through the procedures, and steps toward advocacy were taken through an early childhood services network. Appendices contain advertisements of nanny and child care listings, a survey pertaining to family matters, a referral form and log, a form for a weekly journal, letters, responses to implementation, and other related materials. Contains about 100 references. (Author/LB)

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Developing a Procedure for Assisting Families with Early Childhood Referral Using Strategic, Community-based Planning

by

Sharon M. Cadiz

Cluster XXVI

A Practicum II Report Presented to the Ed.D. Program
in Early and Middle Childhood
in Partial Fulfillment of the Requirements
for the Degree of Doctor of Education

NOVA UNIVERSITY

1991

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PRACTICUM APPROVAL SHEET

This practicum took place as described.

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This practicum report was submitted by Sharon M. Cadiz under the direction of the adviser listed below. It was submitted to the Ed.D. Program in Early and Middle Childhood and approved in partial fulfillment of the requirements for the degree of Doctor of Education at Nova University.

Approved:

August 8, 1991
Date of Final Approval of Report

Mary Ellen Sapp, Ph.D.,
Adviser

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ABSTRACT

Developing a Procedure for Assisting Families with Early Childhood Referral Using Strategic, Community-based Planning. Cadiz, Sharon M., 1991: Practicum Report, Nova University, Ed.D. Program in Early and Middle Childhood. Descriptors: Information and Referral Services /Referral Services/Community Information Services/Childhood Needs/Child Advocacy/Family Life/Family Problems/Early Experiences

This practicum addressed the problem of limited access of community families to early childhood services and information. Negative outcomes for both families and young children were attributed to difficulties in locating services and in providing for the developmental needs of children between birth and age five. These children were at risk for (a) being in substandard care, (b) being abused, neglected or subjected to heightened family stress, and (c) school failure. The primary aim of the practicum was to assist families in negotiating services related to the cognitive, social, emotional and physical development of young children using a community-based referral procedure. A second aim was to develop and implement an early childhood services planning initiative on the community level.

The writer designed a referral procedure that utilized a "warm line" format. A key feature of the procedure was the outreach method that called for the concurrent use of informal kinship/friendship networks, formal networks, and conventional public service announcements. The pluralistic nature of the community demanded diverse, holistic strategies to assist families in making appropriate choices for services. Outreach, coordination and human resource development were other features of the implementation.

The results of the practicum were positive. Difficult to reach families responded to the outreach, received information and shared it within their respective informal networks. Planning efforts were initiated representing community district-wide needs. Eighty requests were processed through the procedure, and steps toward advocacy were taken through an early childhood services network. Families and service providers indicated that the procedure was beneficial both to individuals and community planning efforts.

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CHAPTER I

INTRODUCTION

Description of Community

The community district is located within a densely populated northeastern cosmopolitan city. The 5.2 square mile district is made up of three different neighborhoods that have distinct demographic features. The district's characteristic diversity is shaped by the blending of industrial and residential areas, as well as a variety of ethnic groups from low and middle class backgrounds.

Private homes, multiple dwellings, churches and schools are dispersed amid auto shops, factories, small stores, restaurants and service businesses.

There are no low income public housing projects within the district. The vast majority of housing units are multiple dwellings. The district has the highest proportion of rent controlled housing units in the city, counterbalancing the escalating private sector rents.

Plans for real estate development and new businesses are rapidly changing the community district. A river forms the

westerly border of the district, and vistas of the community district rest against a backdrop of skyscrapers from across the river. The waterfront region of the district is a prime target for development. New construction plans are due to unfold over the next ten years. These plans, along with other smaller projects, signal dramatic changes in a portion of the district that has already undergone some gentrification of housing stock. Further development, toward the eastern border, is starting with the construction of a high rise apartment building. An example of the current trend of development in the district is a newly constructed office tower which is the tallest structure in the county.

Other features of the community district are cultural and ethnic diversity that have resulted from a continual influx of immigrant populations. According to Lewin (1988), one neighborhood within the district is undergoing a major transformation as a result of a heavy flow of immigrants. New immigrants to this neighborhood are coming from Columbia, Peru, Mexico, Ecuador, India, China, Korea, Afghanistan and Armenia.

Lewin (1988) reports on current immigration patterns and lifestyles within the community district. High concentrations of new Asian immigrants have exceeded the total reported in

the 1980 census. The number of community residents of Spanish origin has also increased over the past ten years.

Clines (1988) cites another trend of immigration in his reference to the Irish as the "new illegals" (p. 28). The Irish have been called the new illegals because a growing number of them are undocumented aliens. They join the generations of Irish who are established residents of the community district. Clines attributes this recent phenomenon of undocumented Irish to the 1986 laws "designed to end the old third world restrictions and quota advantage enjoyed by Western Europe--notably the Irish" (p. 30).

The illegal Irish are but a subgroup of the larger group of undocumented aliens within the district. The numbers of undocumented aliens within the district are difficult to measure because of the underground nature of their existence. In 1989, the city's Board of Education published pamphlets in several languages informing undocumented parents that their children have a right to a public school education. Churches and schools are just two of the places in the community where undocumented aliens are served.

Despite the increase of immigration within the district, it is predominantly a White, working class community. A total

of 69,389 are White compared to 1,391 Black; 8,625 Asian; and 9,380 others. The second largest group are of Spanish origin, equalling approximately one quarter of the total population of the district.

District-wide, the mean family income for one worker in the household is $16,430, and $26,570 for two income households. Only an estimated 2,895 households receive public assistance. Female heads of households equal about 4,074, far exceeding the total number of families receiving public assistance.

A fast developing artist community has sparked the growth of several cultural institutions. Numerous galleries, artist spaces and museums provide evidence of that trend. Literary groups, theatre companies and performing arts organizations have created a new dimension to the district's quality of life.

Two school districts and three zip code areas are within the boundaries of the community district. Five elementary, 1 intermediate and 3 high schools serve the area. In addition, there are 11 private and parochial schools serving youngsters from preschool to high school.

Approximately, 8 private day care centers are located within the community district. Five of them are in one zip

code area.

A major mass transit train line runs throughout the entire district connecting many local neighborhoods. The ride provides a scenic view of the changing landscape and is referred to as the "orient express" by Lewin (1988, p. 26). This train line is a vital link between neighborhoods within the district. This linkage is most often used for travel to and from work. In contrast, most social and cultural interaction is focused within the community at local schools, churches, pubs, and bodegas (small Spanish grocery stores).

Traffic congestion is a characteristic feature of the community district. The area is a juncture for commercial traffic in and out of the county. Scheduled preventive maintenance of the bridges, tunnels and roadways in the community district will soon create further difficulties in transportation.

Writer's Work Setting and Role

The district has a total population of 88,985 according to the 1980 census; however, this is lower than the actual count. According to the most recent Community Needs Report (Fiscal Year 1990), the total population is 91,400.

In 1975, the City Charter created the community planning boards in order to put people in touch with city government.

A high level of autonomy and diversity characterize the boards, and local planning is the primary function of each of the boards. Organizationally, the community planning board is an open system designed to be responsive to the diverse, changing needs of the district. The community board's organization and management system contrast city government's bureaucratic system. Community planning boards are designed to facilitate community access to city government by processing complaints and matters of local concern.

The district's community planning board consists of volunteers from the area. They serve their fellow constituents by helping to develop local planning initiatives. A chairperson and other officers are elected annually by the board members.

Regular monthly meetings are held and committees are appointed to handle specific issues. Committees are involved with making recommendations about such things as land use, zoning, budget, city services and youth services.

Each of the 59 community districts of the city has a community planning board. The board office is staffed by a district manager, assistant district manager and office clerical staff. Community board staff handle complaints regarding municipal services and monitor activities within the

district.

Office clerical staff maintain records of community planning board meetings and other relevant data. Administrative and professional staff act as advisors to the community planning board and the various committees of the board.

The Youth Coordinator, a Department of Youth Services employee, is assigned to the community board to assist the Youth Services Planning Committee. Youth services are the exclusive concern of the Youth Coordinator. The level of role specificity for the Youth Coordinator is unique among the various members of the community planning board staff.

The writer is the Youth Coordinator for the community planning district. Responsibilities include giving technical assistance to the Youth Services Planning Committee and community-based organizations, administering assignments required by the Department of Youth Services, developing a resource directory, disseminating youth related information, monitoring and reviewing the youth services funding process, as well as planning projects to benefit area youth. The writer also conducts site visits, writes narrative reports on activities within the district, attends monthly meetings, and makes reports to the planning bodies of the community

district. Other responsibilities include collecting, tabulating and synthesizing data on youth needs.

Implied responsibilities relate to youth development. The Southwest Regional Laboratory Research and Development Final Report (1983) defines youth development, in part, as a result of the "successful negotiation of the transitions from one developmental period to the next" (p. 3) and the "process of discovering and activating potential" (p. 4). These definitions provide the conceptual framework upon which the Youth Coordinator role is built.

The writer has an undergraduate degree in elementary education and a Master's degree in early childhood education. Special undergraduate studies in the areas of sociology, anthropology and urban education have provided an interdisciplinary foundation for the writer's work. Influences have also come from studies of the American and Puerto Rican family, and post-revolutionary Cuba's national child care policy and literacy campaign. The writer is particularly interested in Cuba's national child care policy as an example of one nation's commitment to children, youth and families.

As an advocate for children, youth and families, the writer has been an outspoken supporter of a national child

care policy in this country. The writer's advocacy efforts focus on relieving the tremendous burden that child care difficulties and other family matters place on children and families. A fundamental aim of the writer's work in the field of education is to empower families through humanistic, strategic planning and pro-family advocacy.

CHAPTER II

STUDY OF THE PROBLEM

Problem Description

A growing number of families within the community district were unable to get early childhood services and information. Options for child care, health and family support services were extremely limited. Service and information gaps were often filled in inappropriate, ineffective ways by families. The struggle to provide for the welfare of children from birth to age 5 was dealt with daily. Families confronted the need to support the healthy development of their children without the support of viable community-based services, or a comprehensive early childhood service network. Without the needed support, families put children at-risk for physical, social, emotional and cognitive problems that could easily have affected later school success.

There were no publicly funded child care or family services located within the community district; there-fore, it was difficult for families to obtain needed services. The

closest municipal hospital and health clinic are outside of the district. Families in need of early childhood services were faced with the arduous task of (a) penetrating the bureaucratic maze of agency telephone numbers and remote locations, (b) traveling outside the boundaries of the community district, usually to an unfamiliar area of the city, (c) negotiating services from delivery systems that tend to be hostile and unresponsive to the populations they serve, and (d) overcoming language barriers and unfamiliar procedures.

The inadequacies within the district often forced families to make costly, unsafe or unsuitable choices because of limited services, information, and resources for dealing with the developmental needs of early childhood youngsters. In informal interviews, working parents disclosed fears about the unlicensed care that they were forced to use because of the limited availability of care. Specifically, one parent was concerned about the possibility of a fire in the caregiver's home. Another parent was concerned because the director of a private center refused to permit a preliminary visit to the center. This same parent went to another center on the list of community-based private centers, and found that the programming and nutrition were not adequate. However, left with no other choice, she selected the latter for her

three year old. Others were anxious about childhood illnesses, special needs, and the limited availability of health care providers.

Four specific types of families within the district faced high levels of difficulty in coping with the complex needs of young children. They were:

1. immigrant families
2. single parents
3. teen parents
4. two parent working families

Immigrant families faced language and cultural barriers when obtaining information and services. One Spanish speaking parent asked, when discussing a publicly funded early childhood program, "Is it a government program?" Her tone implied that she immediately distanced herself from the availability of the service. It was clear that she would require further assistance before she could approach this particular agency.

Single parents faced time, energy, and financial constraints in providing for the developmental needs of early childhood youngsters. Generally, these parents were involved in more than one out-of-home activity, such as school, work, work-related training, or community-based volunteering.

Single parents needed support and assistance so that they, in turn, could support the development of their early childhood youngsters.

Teen parents were in special need of assistance in nurturing young children. An existing agency does provide comprehensive information and referral for teens, but it is located far outside of the community district.

Two parent working families were overburdened by the cost of health, child care, educational and recreational services. In addition, they contended with the same limited availability, and variable quality as all the other family categories.

An informal 'underground' network of service providers and resources constituted an elaborate system of care for the early childhood youngsters in the area. This informal network used word-of-mouth recommendations for referral to health care, elderly caregivers, non-relative care, and nannies.

One mother telephoned the community board office for help in finding child care only after exhausting all of her word-of-mouth referrals and recommendations. These referrals were among the most trusted and valued sources of information. Such information networks were outgrowths of strong social, cultural, and kinship ties.

A major drawback to this system was the seemingly arbitrary way that children were matched with services. Individual needs and differences were not given serious consideration when a babysitter was recommended based on what was suitable for an older sibling or a neighbor's child.

The elderly augmented many services for the young within the district. Grandparents and older relatives were seen pushing carriages, taking children to parks and doctor's appointments.

Another small group providing care were nannies (see Appendix A). Some families specifically advertised for Irish nannies. Most nannies were foreign exchange students or young immigrant females. Professional couples used this option to provide full day care, and escort service for a child to and from activities and appointments. This was not a viable option for the majority of families. Certainly, it was not an option for single parents, new immigrants, or teen parents.

Finally, most of the public monies appropriated for youth services within the district funded programs for youth ages 6 to 13. In instances where early childhood services were provided by public funds, eligibility requirements targeted public assistance recipients, low income pregnant teens, and the homeless. Many of these programs provided categorical

assistance for problem, or at-risk families. Such programs lacked holistic, comprehensive service methods. Long term planning, prevention, and investment strategies for all children were not the focus of many existing programs. These deficiencies, coupled with the absence of articulated need among district families, produced the political climate.

The Youth Services Planning Committee had limited involvement with issues related to early childhood services for the district. However, in 1984 recommendations were made for a day care plan for the district. This recommendation was repeated twice, in 1985 and 1986.

In an effort to locate available family support services, the writer visited a publicly funded family services referral agency just across the border of the district. The aim of the site visit was to determine the appropriateness and accessibility of this referral for district families.

The office was located in a public assistance building. The sign on the door read: "Our Doors Are Open." When the writer attempted to enter, the door, in fact, was locked. Once inside, it was observed that the notices were not timely, and were only in English. A few of the pamphlets, however, were in Spanish. The staff persons were unable to adequately describe the services they provided, then, finally, it was

revealed that only public assistance clients were eligible for their services.

Early childhood and referral services were virtually nonexistent within the district. City-wide service networks were dispersed and limited primarily because they reflected patterns of targeting low-income groups and communities. Such patterns parallel the public funding streams that provided the money to run these services. Although potential consumers of these services came from a broad range of economic levels, ethnic, racial and cultural groups, services in the public sector remained clustered in predominantly Black and Hispanic, low-income areas. In addition, there was a shortage of public funds to initiate new programs to meet the expanding need.

The Community District Needs statement (FY '90) pointed out that an out-patient clinic is needed for "prenatal/postnatal care, in addition to general services to address the needs of a large, low income, foreign born population of childbearing age." Under day care needs, full day, ongoing services (on a sliding scale) were among the needs for district families. A broad, comprehensive plan of action was needed to correct existing deficits, and fill the identified unmet needs.

Resolution of the problem would result in community

planners and policy makers having a broader view of youth services; one that encompassed the period of early childhood. Early childhood services were defined as those services that related to the cognitive, social, emotional, and physical development of youth from birth to age 5. A whole-child approach to service referral was instituted. Health, nutrition, social services, group and family care, parental involvement and related family support services were regarded as relevant early childhood services.

Improvement was highlighted by the following changes:

1. Families did not have to cope alone.
2. Families had ready access to early childhood information.
3. Community-based youth service planning bodies included early childhood needs in their focus.
4. Families and community planners called for more services.
5. Families did not have to accept undesirable choices because of a lack of available services and information.

To facilitate action toward resolution of the problem, a procedure was developed to help families to coordinate services for early childhood youngsters. Families were be matched with services and information according to expressed needs. Early child services, resources, and information were be publicized in a

variety of ways.

The diverse needs of identified target groups within the district were comprehensively addressed. Immigrants received information through friendship and kinship networks, as well as social, cultural, and religious institutions. Single parents would received information through local newspapers, and word-of-mouth publicity. Teen parents were reached through peer exchanges, hospitals, schools and family ties. Two parent working families were given information through handouts at local markets, churches and libraries. All channels were utilized for maximum impact in each target group category. Emphasis on certain channels or vehicles for each respective group was intended to promote a high level of responsiveness. For example, church bulletin announcements were only useful with certain groups. Results of outreach were continuously monitored to assess the most effective methods.

The problem confronting the district, with regard to early childhood services was threefold. First, the problem was a discrepancy between (limited) supply and (growing) demand. The second problem was that existing services were not only in limited supply, but they were widely dispersed throughout the city. Third, the agencies providing service

were not accessible or responsive to the population in need. These elements of the problem intensified the overall difficulties that families in the district faced when they attempted to negotiate services.

Problem Documentation

Although some data had been gathered on the demand for services, few steps had been taken on the local, city, state, or federal levels to increase the supply of services. Local planning had not focused on increasing the supply of services in meaningful ways.

Minutes of the Youth Services Planning Committee of the community district (from 1984 to present) indicated that early childhood issues were virtually unaddressed. There were, however, instances where such issues had surfaced. In the minutes of the May 21, 1984 meeting (p. 4), an expense budget item for fiscal year 1986 was described. It called for a day care plan for the community which would provide "full and ongoing day care services for working parents on a sliding scale according to family income." The request for this proposed budget item was prompted by what was described as "a large in-migration of families with young children." Supporting census data helped to document a shift in the area's demographic profile, resulting in a growing number of

preschool children. This expense budget item, however, did not get a priority rating.

In an excerpt from the minutes of the September 24, 1984 Youth Services Planning Committee meeting, a non-profit family development center providing preventive services for at-risk children and their families was mentioned. A grant funded project from Special Services for Children was in the process of locating office space for a community-based branch office just outside the district. There is no evidence to indicate that these services are currently operating.

The July 17, 1985 minutes mentioned increasing day care slots for the district. Again, this was presented as an expense budget item. It did not receive a priority rating under the expense items for the district.

At the September 23, 1985 Youth Services Planning Committee meeting the mayor's remarks on "public education for 4 year olds" was mentioned. It was indicated that a commission had been named to do fact finding in the area of early childhood education. That entry was the final mention of early childhood services.

The Human Resources Administration (HRA), umbrella agency for many public sector early childhood programs, has produced many reports on the status of their programs.

A report on the Human Resources Administration Operated and Funded Programs for the district (FY 1988-89), indicated that only 60 received day care services through the voucher program which subsidizes such services. The nearest satellite center of the Office of Family Services is outside the district. The Office of Family Services had 10 active cases from the district as of July 31, 1988. Another limitation of the services is the fact that the Office of Family Services only helps public assistance recipients, teen parents, relocated families and multi-problem families. Finally, the HRA contract listing, as of June 15, 1989, verified that there are no publicly funded day care programs within the district.

HRA, in their Consolidated Services Plan (Fiscal Years 1988-90), proposed no discernible strategy for linkage of services under their citywide social service system. In addition, they cited no plan for families other than those consisting of "low-income working parents" (p. 84A). They listed the following services among their initiatives:

1. Project Giant Step-preschool program for 4 year olds
2. Voucher program-purchase of service in private centers through subsidies
3. Expansion of services to low-income working families through State funding

4. Automated referral and vacancy control

Furthermore, eligibility for services is based on two sets of criteria. These are (a) social eligibility, referring to parents who are working, looking for work, in vocational or educational programs, incapacitated, or those whose children are at-risk for abuse or neglect; and (b) financial eligibility, based on family income and household size. The range of weekly fees is from two to eighty-five dollars. Service is mandated without fees for children who are classified as at-risk for abuse or neglect.

Priorities and activities for FY 1988-90 continue this targeting of services for the benefit of low income families (pp. 77-80):

PRIORITY 1 - Promote family self support and self sufficiency by providing day care for children whose parents are working, in training, or seeking employment. To ensure continued day care services for low income families striving to obtain or retain employment.

PRIORITY 2 - Increase day care services to children of special populations. Day care has gained universal recognition as an effective prevention strategy in recent decades. Day care services are being increasingly used to assist populations at-risk, including families in cases of suspected, known, or potential child abuse or neglect; homeless families; and teenage parents.

The priorities, clearly, address the urgent needs of community

families, however, by targeting only the low income, and at-risk, they limit eligibility for many families.

Gilman (1987) lists available services for children and families in public and private hospitals throughout the city. There are no public hospitals or pediatric care services within the district. The closest city hospital serves a total of approximately 40,000 patients annually. It has a pediatric emergency room, and a developmental evaluation clinic, but no parent support groups, special services or presurgical classes for children and parents. Private hospitals that provide these services are, again, a distance from the community district. Cost, travel, and piecemeal service delivery methods make comprehensive health care inaccessible.

In 1986 Assemblywoman Catherine Nolan conducted a survey on child care needs. The survey targeted a substantial portion of the community district. It indicated that 54% of the families needed fully subsidized day care or voucher payments. The highest ranking reason for children needing care was that both parents worked (43%). The second highest ranking reason was that the single parent was working (37%). Fifty-three percent needed child care for 8-10 hours. Eighty-eight percent of the respondents reported special needs including physical, emotional, hearing and speech among the

preschool population.

In January 1989, the writer surveyed 50 residents of the district using the nationally circulated survey: "Tell the President: Your Family Matters" (see Appendix C). The 50 responses from the district were sent in and included in that nationwide sample. Forty of the 50 respondents felt that (a) the federal government does not pay enough attention to child care and other family concerns, and that (b) although families would prefer to make the choice of care, they felt government should make quality, affordable care available for all children who need it. Nationwide, parents similarly felt that the federal government does not pay enough attention to child care and family matters.

Camp and Moore (1989) tabulated and compiled the data for the "Tell the President: Your Family Matters Survey." They reported that 9,782 questionnaires were tabulated for this survey. Sixty-five percent of the total respondents felt that the government should help to provide good, affordable child care services to children who need it. Forty-five percent of the families surveyed needed care for children between the ages of 2 and 5. Overall, the community district families echoed many of the same concerns that were expressed nationally.

One local parent wrote on her survey: "should make available child care for middle income families, too." National results indicated that household incomes were distributed as follows:

Less than $ 2,000	17%
20,000 to 34,000	27%
35,000 to 49,000	24%
50,000 to 74,999	20%
75,000 to over	11%

This shows that a larger number of middle and upper class families are in need of early childhood and family support services.

Further review of national trends indicates that the number of working mothers has greatly increased over the past decade. Nolan (1989) pointed out the following in relation to changing family needs:

> Parents are entering the workforce in greater numbers than ever, and the government is changing its thinking about employee benefits. Accommodations must be made for those who balance their lives between work and raising a family. (p.2)

Only rough estimates are available to document the number of teen parents in the district. Vital Statistics Data Book (1987), a citywide document reporting births and other related information, indicated that, in the county, there were 38 live births to teens under 15, and 636 to teens between 15 and 17.

Pregnancies to School Age Children (1985) cites a total of 161 births to teens between 15 and 17, and 7 to teens under 15 in two school districts within the community board's jurisdiction. The report was compiled from Department of Health data based on "health area divisions" within the community districts of the city. These rough estimates result from overlapping sources, but it is clear that teen parents within the community district have a high degree of unmet need in the area of early childhood services. It is conceivable that, among the 1985 births to teens, there are, now, four year olds in need of early childhood services.

Tracking the numbers of the new immigrants in the community district is even more difficult. Both legal and illegal immigrants are rapidly changing the cultural fabric of the community. This is documented by Leahy (1989) and Yamada (1990).

Leahy (1989) speaks about a new wave of immigrants who have settled in various locations within the community district. He points out that they have goals similar to their predecessors, namely, a better life for their children. Yamada (1990) describes an example of how new immigrants are revitalizing churches. He also notes that many residents resent the newcomers, although he adds that this will probably

change. One church is described as having a long standing reputation for having many immigrants pass through its doors, starting with the Dutch. Recent immigrants who attend the church are from Taiwan.

Sources do not indicate how these new immigrant families cope with early childhood needs. It is implied by patterns of immigration among certain ethnic groups that elderly relatives, other relatives, and church sponsored programs partially meet the needs.

Causative Analysis

Each of the three segments of the problem: (a) discrepancy between supply and demand, (b) dispersed nature of services, and (c) delivery system inadequacies were linked to specific multidimensional causes. Four categories of influence: social, political, economic, and cultural have helped to shape the complexity of the problem. These combined influences within the community district's internal and external environment have resulted in there not being any community-based resource and referral services to assist families in meeting their early childhood service needs.

There was no existing mechanism to dispense information or deliver services on the level at which they were needed.

It was necessary to, first, address the fundamental lack of focus on the broad issue of early childhood services. The following 4 points describe the most basic reasons for a lack of focused discussion and planning on this issue:

1. Those in need of the services did not share concerns.
2. Planning bodies and policy makers did not perceive a pressing need.
3. The early childhood service needs of new immigrants, teen parents, single, and two parent working families were not represented on the Youth Services Planning Committee.
4. No early childhood service providers were members of the Youth Services Planning Committee.

Naisbitt (1984) stated that trends start from the bottom up, and in this particular instance there was little activity on the bottom to push the issue upward. Instead, the issue was diverted as a result of diverse social, political, economic, and cultural influences.

In Figure 1, the writer compares and contrasts the various strains of influence that contributed to the problem. It addresses the three areas of the problem, as well as outcomes that resulted from this situation.

Figure 1. Causative Analysis: Summary of Problems, Influences and Outcomes

PROBLEM	SOCIAL	POLITICAL	ECONOMIC	CULTURAL
(a) discrepancy between supply & demand	-family attitudes encourage passive coping -lack of information on benefits, entitlements	-planning bodies do not hear from families -needs are not fully documented -lack of broad constituency support	-fiscal constraints in public sector -lack of space for additional community facilities -limited plans for private sector involvement	-mores, & folkways reinforce fear & distrust of services -lack of confidence in ability to communicate needs
(b) dispersed services	-services are not conveniently provided where need exists -secondary group relationships (ie. with doctors) are usually within the community	-multiproblem, low-income families are targeted for services & referral	-funds only available for services to multi-problem & low-income families in specified target areas within the city	-cultural trait of many groups is that they do not wish to travel outside area -services are thought to be in "bad" areas
(c) delivery system inadequacies	-many families resent being treated as needy & dependent -families must be submissive to receive	-targeting produces a single profile of clients & their needs -agencies	-many are not income eligible -travel to services is often inappropriate for	-cultural values prohibit asking for help from others -many feel devalued

Figure 1. Continued

Problem	Social	Political	Economic	Cultural
delivery system inadequacies	assistance	tend to have a single service orientation	their needs	or needy as a result of asking for help

SUMMARY

OUTCOMES:

1. Lack of referral and coordinated, comprehensive, community-based services.

2. Families believe that they must take care of their own.

3. Funding, eligibility requirements and targeting have narrowed the range of services that are available to those in need.

4. Cultural attitudes reinforce subgroup resistance to help and things that are unfamiliar.

Another prevalent influence that helped to create the problem, was the perception that the age distribution within the community is in an older range. This view translated into the types of services that were available, such as senior centers, senior citizen home owner assistance programs, and home care services.

Additionally, an influx of legal and illegal immigrants shifted the age distribution within the district. The numbers were not clearly documented, but based on the gross overcrowding in the schools and figures from the various parishes, there are growing numbers of young children, and immigrants of childbearing age. Consequently, the services and perceptions did not keep up with the changes within the community. The 1990 Census will be a critical factor in how related needs are met over the next 10 years.

It had previously been demonstrated that when initiatives surfaced to address early childhood service needs within the district, they dissipated because of (a) improper alignment with district-wide planning goals, (b) an overriding perception that such needs were not a priority, and (c) a negative impact from social, political, economic and cultural influences.

Long Island City YMCA (1988) completed a needs analysis

and strategic plan in which child care was listed as a key "program/service" area. The principal goal was to explore expansion into the child care service areas. Their 1988-90 operating plan included yearly objectives related to investigating opportunities for corporate and community child care. A lack of funding, space, corporate interest, and broad based support thwarted the three year planning objective. Although the Long Island City YMCA (1988) strategic plan was not implemented, it provided evidence of an analysis of demographic, social, economic and cultural variables related to the problem of early childhood referral. Their strategic plan suggests another way of looking at the early childhood service problem confronting the district.

In Figure 2, the writer outlines the thinking process used to examine issues related to the problem.

Figure 2. Strategic Thinking Analysis

INTERNAL AUDIT		EXTERNAL AUDIT	
STRENGTHS	WEAKNESSES	OPPORTUNITIES	THREATS
1.stable community institutions	1.shortage of service providers	1.opportunity to create a local early childhood service network	1. city,state & federal fiscal crisis
2.community planning board support for increased services	2.shortage of space	2.1990 Census may document changing demographics	2.early childhood staff shortages
3.developing area	3.lack of a vocal constituency	3.10-year-plan for the county being drafted which could include early childhood service needs	3.regulatory constraints (ie. health department, insurance)

Review of Related Literature

The combined aspects of the community district's internal and external environment resulted in the absence of community based resource and referral services that responded to the early childhood service needs of area families. The review of related literature focuses on information and strategies that have been used to remedy this type of problem in other settings. In addition, social, political, economic and cultural influences were looked at to address the three identified segments of the problem; namely, the discrepancy of supply and demand, dispersed nature of services, and delivery system inadequacies. Furthermore, the impact of these influences on the ability of families to negotiate services, and meet the developmental needs of their young children was investigated.

Previous efforts toward resolution of the problem of resource and referral were impeded by a combination of parental views, societal trends, and changes in the institution of the family. These factors formed the context for difficulties related to early childhood service referral. The following sources discuss information and strategies relevant to these prevailing conditions.

Wingert and Kantrowitz (1990) cite parental concerns

and attitudes related to child care. They give the example of a child care expert who, as a new mother, encountered enormous difficulty in finding a suitable child care arrangement for her son. She used a total of 10 caregivers by the time her son was 2 1/2 years old. Wingert and Kantrowitz conclude that the task of finding the right situation is "often just a matter of luck" (p. 86).

Quindlen (1990) reports on an incident in which a doctor, who is the mother of four young children, contacted a major metropolitan newspaper with a story that she felt was of major importance; namely, that her child's day care center was closing. Quindlen uses this incident to dramatize the discrepancy of awareness about the crisis in child care. Quindlen explains that women have traditionally shielded society from the horrors of the flawed system of care, often silently shouldering the burden and guilt when things go wrong. Contrary to tradition, this mother articulated the problem in no uncertain terms, and Quindlen agrees that this is what is needed.

Quindlen (1990) states that colleagues, employers and male spouses have been insulated because it has been "considered prudent and professional [for women] to keep their mouths shut about this issue" (p. E19). Quindlen recommends

that women and other concerned parties end the silence by talking to policy makers, legislators, union leaders, and CEO's to let them know just how dismal the situation is. She explains that some have sought to "insulate" when they needed to "educate" others about the current haphazard system of care. She adds that those in the private sector, are moving faster than mothers and families to resolve this crisis of care. Quindlen implies that as long as families silently struggle to locate and maintain care for their young children, the burden will remain theirs.

The burden of locating suitable child care services is just one of many stressors confronting families with young children. A variety of stressors compound the difficulties associated with getting early childhood information and services.

Belsky, Spanier and Rovine (1983) find that in terms of marital functioning and the division of labor, wives experience more of the child care responsibilities and accompanying stress. They point out that some aspects of parenting produce a negative effect on the marital relationship signaled by the transition to parenthood, occurring between the last trimester of pregnancy and the nine months following childbirth. They do not find a sustained,

unqualified damaging effect, but note that stress producing developmental change does occur across the transition to parenthood.

LaRossa (1983) also discusses the transition to parenthood. He points out that child rearing is time consuming and requires an adjustment of personal schedules, with the impending effect of role overload.

LaRossa (1983) points out that there are stresses produced as a result of parenting and the social reality of time. He states that heightened sensitivity to time can make it seem limited. Furthermore, he explains that because "babies are relatively ignorant of the social clock" (p. 585) that governs family life, they help to produce time related stress.

The pressures of perceived time constraints, as well as other forms of family stress, inhibit the process of getting information about services for young children. One coping strategy that suggests a method for maintaining family stability in the midst of impending stress is discussed by Curran (1986). She describes money, time and children as the major family stressors. She refers to families that cope well with these everyday stressors as stress reduced families. They characteristically find solutions instead of dwelling on

what or who is responsible.

Curran (1986) states that many families believe they encounter stress because they are not a good family, or have failed at family life. In her opinion, this attitude produces an unrealistic view of stress. Stress can have positive effects if families are able to objectively sort through the controllable stresses, seek solutions, view it as temporary, and pull together to resolve problems.

Solving the problem of how to meet the needs of early childhood youngsters, and support the efforts of families coping with related stress is a growing concern. It is no longer only considered a matter to be resolved within the institution of the family. The status of children in society is being reassessed, and new strategies, roles and responsibilities are emerging. Ideas for redesigning educational, social service and health care systems are being discussed in order to handle the problem of linking parents and young children with services and information.

Zigler (1987) sees the community school building as the center of the child care system, offering support services for all parents. He suggests that the first step in implementing such a plan is to develop 60 demonstration schools around the nation.

Zigler (1987) projects that by the year 2000, 75% of all two parent families will have parents who are engaged in work outside of the home. He points out that parents have diverse market needs related to early childhood services. Zigler concludes that institutionalized, high quality child care must be provided for each child who needs it. In addition, he recommends that the "system must be sensitive to the varying needs of children," (p. 9), and provide outreach support, information, and referral services.

Fiske (1990) describes Betances School (Hartford, Connecticut), a pilot program for Dr. Edward Zigler's "school of the 21st Century." It houses a day care center among other child related social services. The school is open a total of 13 hours a day, has a Family Resource Center, and will soon have a counseling and referral service for teenage pregnancy prevention.

Fiske points out that similar pilot programs that link schools, child care, counseling and referral have been started in Missouri, Colorado, North Carolina and Wyoming.

Cohen (1986) warns against the "crisis oriented approach" that causes early childhood services to "expand and contract sharply as dollars become scarce" (p. 159). Cohen points out

that "health, nutrition and social services" (p. 6) are necessary components of a successful system that addresses the needs of young children and their families.

Edelman (1987) explains that existing service delivery systems are "fragmented" (p. 18), and lack the ability to solve social problems that are "cumulative and complex" (p. 18). She emphasizes a service approach that is collaborative, comprehensive and community-based.

Blackman (1986) recommends a health tracking system to eliminate some of the environmental risk factors that young children face. He states that this can be done through screening projects, health service delivery programs and day care. The goal is to provide early care, intervention, and appropriate referrals to ensure that children do not get lost in the system. The tracking system would link hospitals, private physicians, other health care professionals, educational programs, therapists, and social service agencies in the service of families and young children.

Kiernan, Jordan and Saunders (1984) discuss how the young mentally disabled have been a neglected, mistreated group in our society. They recommend that parents get help as soon as possible for children suspected of having a disabling condition. They state that, "These early years can be

critical" (p. 9).

The developmental needs of children and families have moved beyond family solutions, local planning initiatives, and delivery system policies into the national arena. Solutions to unmet early childhood service and referral needs have gained attention through issues such as teen pregnancy, parental leave, universal child care, work and family quality of life, and young families in poverty. Public policy is also beginning to reflect the needs of children and families. The following references discuss social issues and policy matters that relate to the changing family, economy, and emerging partnerships that address early childhood service and referral needs.

Schroeder (1989) discusses the limited options for families in need of child care. She cites the history of a bill for affordable child care that she has supported since 1973, explaining that it still hadn't been passed. She points out that five million children under the age of 5 are in need of care. No major effort of the Federal government has addressed the overwhelming need, in her estimation, because it has been considered a "women's" issue (p. 59).

Schroeder (1989), in her discussion of a national family policy, says that government should lead the debate. However,

in the absence of such leadership, she recommends that American families become proactive and vocal on their own behalf.

Schroeder (1989) cites the findings of the 1988 national "Family Matters" poll which indicates that people would be willing to pay higher taxes if the money could go into family support services such as child health and education. She challenges the investment logic that puts billions into national defense and little or nothing into a national family policy. She advocates for:

1. better treatment of families in the tax code
2. family and medical leave
3. affordable child care
4. minimum health coverage (p. 174).

A partnership of the government and the people is described as a major principal behind family policy.

The United States Department of Education Report to the President on the Family (1986) outlines a pro-family policy which emphasizes less government involvement and public spending. The core of belief expressed in the report is that family problems and issues are best handled close to home because government intervention usurps parental authority and family rights. Externally imposed policies are thought to

inhibit self determination and prosperity. Welfare is cited as a key example of how government has altered family stability. The period during the 1960's and 1970's is blamed for an alarming upheaval of traditional values. Definitive plans for a non-intervention policy are not fully developed, but strategies point to a nostalgic view of the family and a "common sense" (p. 21) approach to the complex problems confronting the family.

The United States Department of Education Report (1986) explains that the only level of government that should be involved in family policy is that level closest to the need or problem. Investment strategies are considered part of the flawed solutions of the past administrations. The report further indicates that the federal government defers responsibility to local governments and planning bodies to preserve the integrity of the American family.

The Committee of Economic Development Statement on National Policies (1987) discusses problems associated with unmet needs of preschool children and their families. The focus was on preventing school failure and decreasing drop-out rates through investment strategies aimed at the early childhood level. According to their information, in 1986 the nation spent a total of $264 billion on children 6 years and

older, while only an estimated $1 billion was spent on education for those 5 years and younger. An inadequate investment has resulted in an increase of risk factors among infants, especially of teen parents. Infant problems include:

1. low birth weight
2. emotional deprivation
3. chaotic home lives
4. drug dependency
5. developmental retardation and learning disabilities

(p. 23-24).

Key recommendations cite the need for a holistic approach from the prenatal stage to adulthood, sustained intervention and support services, a "success-oriented environment for both young mothers and parents to prevent the problem from becoming multigenerational" (p. 27).

Footlick (1990) traces demographic patterns of change that have altered perceptions of the American family. He points out that, ironically, the traditional American family of colonial times did not portray a single breadwinner, but a partnership of husband and wife together. Industrialization forced the husband into a remote workplace, leaving the wife at home to raise the children and care for the home. Following World War II there was another wave of change in

family life that inspired another traditional family image. The current conditions that have had an impact on the family are described as leading to the disintegration of American family life.

The William T. Grant Foundation Commission on Work, Family and Citizenship (1988) reports that youth and young families are in desperate need of "comprehensive, flexible and coordinated services beginning early in life, including early childhood and health education" (p. 19). Community involvement is also stressed in this report which highlights the findings of a two year study designed to examine the problems confronting 16-24 year olds. Many of this same group are unemployed or under-employed. The percentage of married males unable to provide for their families in poverty is growing. The authors recommend an increase in public and private support to reduce the financial and emotional strains associated with child rearing and family life among young families.

Goffin (1988) defines the new context for pro-family advocacy as being made up of linkages and relationships among early childhood educators, parents, caregivers and child care systems. The goal is to support and strengthen families and promote a political climate that will do likewise. Goffin

concludes that two sets of assumptions shape family policy. One set endorses the attitude that "families should be self-sufficient" (p. 53), without government intervention, and that they are "viewed as incompetent" (p. 53) if they need support. The other set of assumptions addresses the shared responsibility of society and families for the health and well-being of children, with political support for services, and a pluralistic view of the family.

Kagan (1989) discusses what she calls the tough issues of "inequity, discontinuity and fragmentation" (p. 434) in the child care and early education debate. Kagan examines ways of addressing policy that are in accord with the aim of giving youngsters a good start, while supporting the family and community.

Kagan (1989) outlines difficulties associated with drafting policy and asks some important questions:

1. Can a policy framework established over decades to promote categorical and fragmented programs change to embrace the current holistic orientation?

   Can systems established to serve children 5 and older, be altered to accommodate younger children, their families and a commitment to prevention?

3. Can policies shift to accommodate changes within the sociocultural context?

4. What do past child and family policies suggest about the potential for future change? (p. 435)

Each question addresses tough issues related to early childhood policy.

Kagan (1989) points out that children's policy has been founded on the tradition of "family privacy, the work ethic and religious freedom" (p. 435). The various shifts in emphasis from targeted to universal services, and from private to public will manifest conflict to the degree that they impinge on these long standing American values. She cites the underutilization of Head Start as a prime example. She explains that there is a "two tier" system of care that segregates children based on socioeconomic factors such as class and financial standing of parents.

Kagan (1989) suggests that the inequities of conventional policy have made services inaccessible and unavailable to those who need them. She cites the underutilization of Head Start as a prime example.

Kagan (1989) similarly discusses the issues of discontinuity and fragmentation. Discontinuity, she points out, occurs when disparities between home and school persist. With the dilemma of discontinuity comes the difficulty of defining standards. Fragmentation is illustrated by what Kagan calls a piecemeal approach to policy, and the competition among preschool programs. She

states that, "Rather than a group of programs working together with common spirit and resolve, the "system" of early care and education remains fractured in most communities" (p. 437).

Kagan (1989) makes the following recommendations for overcoming the difficulties of policy making for meaningful appropriate reform:

1. view problems and solutions more broadly
2. develop interdisciplinary, community-based planning teams
3. develop cross-system collaboration - span agency boundaries and funding streams
4. foster a unified vision
5. planning/policy should reflect the unique values of respective communities
6. assess and prioritize community needs
7. states should be encouraged to develop interagency planning bodies to assist committees
8. federal government should generate and disseminate information, support, research and demonstration efforts (p. 438).

Child Care Action News (1990) describes the role of public/private partnerships in addressing child care needs. The joint approach is intended to ease the stress to families who have great difficulty finding and paying for services. Employers are said to have concerns about the future labor force. Although there is a recognized crisis, the public

sector is said to be confronted with limited financial resources to meet the growing demand.

Related aspects of family life are discussed by Skow (1989), McCoy (1987), Presser (1989) and Bode (1980). They highlight the demands placed on families with young children, and changes in family roles. They allude to a variety of coping strategies.

Skow (1989) summarizes some key points made by sociologist Arlie Hochschild who studied 50 two job couples and their differing male/female role responsibilities. He points out that according to Hochschild's analysis of national studies, "women spend 15 fewer hours at leisure each week than their husbands" (p. 62). Only twenty percent of the couples shared child rearing and household chores equally. Skow points out that Hochschild endorses pro-family legislation, and other problem solving plans to equalize and minimize the demands.

Mc Coy (1987) cites Census Bureau statistics which indicate that 21% of United States families with children are single-parent families, and 90% of them are headed by single women. Currently, there are 12.6 million children living in one parent households.

Mc Coy (1987) recommends that single parents make proper

use of referrals to special organizations such as Parents Without Partners, Big Brothers/Big Sisters of America, Single Mothers By Choice, Displaced Homemakers Network, and Parents Anonymous. Community-based resources are also recommended for newly widowed or divorced single parents. An example of such a resource is a Washington, D.C. based support group for single men and women called New Beginnings. They offer discussion group activities on relationships and coping skills. Other groups such as Parents Anonymous help single parents cope with pressures arising from child rearing.

Presser (1989) cites a longitudinal study of grandmothers as child care providers. Three related trends were highlighted: (a) the increase of mothers of young children 2 years of age, according to the Department of Labor); (b) a decline in grandmother participation in child care; and (c) increased demand for infant/toddler care. The study was designed to uncover some of the economic complexities of this informal system of care. Among the findings is an increased incidence of grandmothers employed in either full or part time out-of-home work. In such situations the need for adjustment and adaptation requires elaborate schedule arrangements, regardless of whether the mother is married or single.

Presser (1989) cites data gathered in 1984 from

interviews of a sample of 796 persons between 19 and 26 years of age (married and unmarried), with children under 5 to ascertain the prevalence of grandmother care. The following quantitative information is given based on this analysis:

> -52.9% of employed mothers in the sample relied on relatives (including fathers) as primary child care providers for their preschool children
> -23.9% of all care was provided by grandmothers
> -the next most common type of care was that provided by fathers (15.5%)
> -40.1% of the mothers relied on nonrelative care
> -23.7% of the mothers reported having two or more types of child care arrangements for their preschool child
> -"principal care" was most often defined by the longest number of hours" spent with a certain caregiver
> -the mean number of hours of care provided by grandmothers was 27.1 (regardless of whether the grandmother was the principal caregiver), p. 583.

Presser (1989) points out that grandmothers are also "juggling work and family roles" (p. 584); hence, grandmothers are a diminishing resource.

Bode (1980) explains that single pregnant teens have special needs that require special attention. "Emotional and family relationship problems" (p. 81) characterize the teen parent. Services to meet their special needs include medical and health care, child care, nutrition, education, and appropriate community resources. Bode (1980) points out that, in many instances, families help to raise the child born to a teen parent. In such cases, grandparents, uncles and aunts

help to provide the primary support system. When this is not the case, extreme difficulties arise in meeting the special needs of teen parents. He cites that among teens who were interviewed, many had no idea what to expect in their new parenting role. They could not comprehend what it would be like to raise a child, even in instances where they had babysitting experience. They were totally unprepared for the total dependency of infants, the time consuming demands, or the level of commitment that was needed. The restrictions and burdens placed on a teen parent create the need for effective social, emotional and financial support systems.

All family types confront serious problems without needed services and support systems. Erosion of traditional support systems such as the extended family have resulted in heightened isolation of the family.

Dahlstrom and Liljestrom (1967) cite other factors related to the isolation of the family, and the absence of appropriate support systems. They affirm that the family unit is the most enduring social group affiliation that individuals have. As such, the group functions carried out by the family relate to internal and external relationships. They suggest that problems appear when the total fulfillment of family member needs are sought exclusively within the family. This

type of internal group functioning can impair certain aspects of development. An example is given of a situation where total acceptance of a family member might "stifle productive dissatisfaction" (p. 55), precluding individual efforts at problem solving or decision making.

Dalhstrom and Liljestrom (1967) refer to mental health definitions of "human fitness" related to health, intelligence, self esteem and relationships outside of the family in their discussions of the "therapeutic view" of the family. These conclusions are based on the work of Gronseth and studies done in World War II Germany.

The following points are made regarding the negative impact of family isolation:

> It has been suggested that owing to the weakening and dissolution of ties of kinship and to other generations, the individual has lost the awareness of an organic social context. Under such circumstances it is asserted, the family in an unfriendly society is not merely a means of guaranteeing emotional satisfaction to the individual; family solidarity and its preservation have become ends in themselves. According to this view, the capitalist industrialized society has become characterized not so much by individual family egoism; a family egoism that entails, among other things, a rejection of social obligation, a relative indifference to social and political problems, for its own members. (p. 56).

Family isolation and indifference have implications for the situation that exists within the district. Isolated

families are forced to respond to a rapidly changing economy that forces women into the workforce.

Friedman (1986) also cites a study done in Portland, Oregon which showed that of the over 8,000 employees who responded, 59% of the female workers with children under 12 had problems finding care. She pointed out that the evidence does not support that this is a women's issue, but that it is a family problem. In most cases, absenteeism is the result of families looking for care or staying home with a sick child. Such private choices indicate that families are, in fact, dealing with such problems in isolation without intervening support.

Friedman (1986) cites a study conducted of 90 employees over a 20 month period. The study compared (a) those using company sponsored day care, (b) those who made their own outside child care arrangements, and (c) those with no children or grown children. Those who utilized the company sponsored day care had a lower rate of absenteeism (4.4%) compared to the other 2 groups (6.02%). Friedman explains that offering information on parenting and day care selection is one way for local governments and business to collaborate in support of families.

Friedman (188) cites the changing attitudes within the

society that falter on the issue of responsibility for child care. Many managers are ambivalent about women in the workforce; hence, they see child care as the principal responsibility of the mother. Friedman refers to a deeply rooted belief in self determination and "rugged individualism" (p. 80) which attributes the private choice of parenthood and the responsibility for providing care to the parent. Employees share this belief system.

Anderson (1990) interviewed Friedman on corporate child care. They discussed the types of benefits and services currently offered by employers, and the forecast for the future. Friedman projected that resource and referral will be a growth area, and an emphasis on supply will follow. Consortia and coalitions, she explains, will pool corporate resources for providing such benefits. Another strategy for meeting the need will be flexibility in work schedules. Friedman concludes that there is no one answer for child care needs, but a package of "child care policies, benefits, services and contributions" (p. 1).

Nollen (1989) points out that work-family issues are social, as well as economic. He recommends collaborations with community organizations and encouragement for changes in public policy to define government responsibility for

resolution of related problems.

Gordon (1989) covers some relevant aspects of the discussion of child care, and its relationship to the growing numbers of children who have mothers in the workforce. He admits that a child care revolution is inevitable, but interjects that poor quality and an inadequate system of care are as bad as no child care.

Gordon (1989) points out that there are difficulties in the current situation, including the fact that "makeshift arrangements force parents to devote additional time and worry into meeting child care needs" (p. 36). Gordon recommends varied options for parents, not a single choice, because "family needs vary" (p. 36-37), and "referral services to connect families with providers" (p. 36-37).

Dynamic influences related to economic and political opportunities for change are numerous. Trends, demographic factors and diminishing financial resources are discussed in the literature demonstrating the dramatic changes that will potentially have an impact on strategic planning efforts to resolve the problem.

Naisbitt (1984) shares his analysis of the most recent trends of American society, including the major shift from an industrial to an information society. Naisbitt points out

that, contrary to popular belief, New York is not the breeding ground of innovation and new trends. Cities such as Tampa, San Diego, Seattle and Denver are cited for surpassing New York in initiating trends. He adds that "social invention" occurs in 5 states: California, Florida, Washington, Colorado and Connecticut. Naisbitt implies that these places have a 'handle' on future trends, and solution strategies for which all states and cities will soon have need.

Naisbitt and Aburdene (1986) refer to the future of education systems and the role of cooperation in the delivery of services saying that, "All across America, businesses have become the new local activists in education" (pp. 172). This observation makes a projection about the future of education in this country and the feasibility of strategies pertaining to the local problem of early childhood referral.

Starr (1985) discusses the popular notion that New York City will become a city only for the very rich and very poor. He adds that social programs and policies have reinforced the middle class view that they are not treated as well as the low-income population of the city.

Starr (1985) explains that high taxes that support New

York City's social service network, including Medicaid and Aid to Dependent Children, are part of the reason for the mass exodus of business, diminishing support for the economic base of the city, and overall decline of the city.

Starr (1985) prescribes leadership that skillfully analyzes needs, opportunities and threats while maintaining the responsibility of charting a course through difficult problems. He refers to religious institutions for their traditional role in balancing vision, faith, honesty and integrity. Without leadership that reflects moral insight and strategic planning skills, he concludes, New York City will enter its final decline.

Levine (1990) highlights projections made in a recent study done by the Port Authority of New York and New Jersey on demographic changes for the next three decades. The forecast alludes to greater increases in the number of elderly, while the general population will only moderately increase. It is expected that by 2015, the number of those over 85 will equal almost 400,000. A variable that may have an impact on this process of "graying" is the influx of immigrants who are described as mostly young.

Levine (1990) cites some of the implications and

conclusions drawn by urban studies experts who forecast that an emphasis will be placed on "better use of all people, of everybody being more important especially the disadvantaged" (p. 1). Levine suggests that the graying of the city, influx of young immigrants, and emphasis on developing all human resources, especially the disadvantaged, will provide opportunities for strategic planning in the city. Presumably, there will be opportunities to create policies that address these demographic features to resolve some problems confronting the city.

Bouvier (1988) discusses the inevitability of immigration, both legal and illegal. He surmises that future changes in the nation's population will have a definite impact on future cultural, social, economic and political issues. For example, he points out that the birth rate among Americans has declined since 1972. Currently, the birth rate is "1.8 live births per woman" (p. 87). Levels of immigration will play a role in determining whether the country's population will decline or increase.

Bouvier (1988) explains that immigration from the Caribbean basin: Mexico, Central America, Caribbean Islands, Columbia, Venezuela and Guyana has increased.
Evidence indicates that this will continue despite new

legislation to bar illegal immigrants, while limiting legal immigration to 500,000 per year.

Bouvier (1988) further projects that there will be no racial majority and that the nation will "have the opportunity to participate in the first multiracial democracy in the world" (p. 91). He states that two thirds of the new immigrants are in California, Florida, Illinois, New York and Texas. The future, he explains, holds a changed American identity which, unlike the melting pot, will be the "salad bowl of plurality" (p. 92) because of partial assimilation. He suggests that language will continue to be a major issue citing one school in Los Angeles where 60 different languages are spoken. Another issue will be economics. He states that larger numbers of immigrants and their children will enter the labor force and after the year 2000, "over 90% of the new workers in California and Texas will be minorities: Blacks, Hispanics or Asians" (p. 93).

Cultural diversity is another dimension investigated in the literature review. The small town atmosphere of the community district, with its many diverse ethnic groups and localized patterns of interaction, contributes to certain characteristic ways of viewing the needs of children and families. The implications of cultural differences provide

insights into the special needs of new immigrants, as well as other established ethnic groups. The literature also discusses the influences of churches, community activism, and development on similar problems.

Rowe (1988) refers to a Smithsonian Institution publication (Generations: A Universal Family Album) that takes a global look at families, their cultures and parenting traditions. It views the phenomena of birth and child rearing experiences from anthropological and ethnographic perspectives. A central concern in all the diverse patterns and belief systems is the nurturance and protection of the young. Rowe illustrates this point in her reference to precautions that are taken "to protect against physical or supernatural harm, and to promote health, growth, good fortune and long life" (p. 19). This embedded meaning lies behind child rearing practices across cultures.

There is a unifying commonality expressed in the cross-cultural concerns for children. While there is recognition of cultural, racial and ethnic differences, there is still a common bond of caring for the young.

Sholtys (1989) suggests that efforts be made to understand the varied circumstances that bring families to a new country. She explains that a certain degree of outreach

to the family is often needed to clear up problems with communication, social/emotional adjustment and culture shock. Steps to "create a smoother transition for the child" (p. 77) should be taken.

DiMartino (1989) discusses the differences that are manifested in the actions, values, and beliefs of children from different cultures. DiMartino points out that teachers, as observers, can easily discern differing concepts of time, family, and sex roles. For example, she noted "primacy of the family" (p. 31), and a lack of exactness in perceptions of time (p. 31) among children of Sicily. DiMartino stresses the fact that because values and beliefs are different, it doesn't mean they are less important.

Glazer and Moynihan (1963) describe the roots of political and social attitudes of the Irish from earlier waves of immigration. Loyalty and allegiance to a small area, cohesiveness and distrust for outside interests characterize the Irish political tradition. In regard to the institution of the church, they describe it as being a focal point of beliefs and values. Also, Glazer and Moynihan state that "education was largely a church function in the early days" (p. 234).

O'Grady (1973) describes some historic qualities

of the Irish immigration to America that have endured since the early migration of the nineteenth century. O'Grady refers to the deeply rooted belief shared by a vast majority of Irish immigrants, that to be Irish is to be Catholic (p. 109). A strong identification, therefore exists between the Irish and the Catholic church. The church has historically been a bastion of political power through the Irish vote. Within this tradition of beliefs and values, the family is described as an extension of the church's influence.

Basler (1988) sees the church as a community resource that is a major force in a movement to return decision making power to the people. He cites the success of various church coalitions in solving social problems such as those related to housing needs. Basler, also, stresses the fact that the "process" is more important than the "product" (p. 23) because it enables the people in need to take charge of their destiny. He highlights other projects that address issues including support for intact families, job placement, voter registration, and help for new immigrants. In conclusion, he says: "An organization of people begins just by providing some commonly needed services, but in that fashion begins the process of enabling people to create the community resources necessary to improve their lives" (p. 24).

Polsky (1988) highlights some of the cultural values of Korean immigrants. "Language barriers, loneliness, discrimination, family pressures, unfamiliarity with United States laws and customs" (p. 18) are cited as major problems confronting Koreans in the city. Family conflict arises out of differences between Korean born parents and American born offspring. Many parents fear the emergence of youth gang activity, and the young are confused by the contrast between American values and parental standards for discipline and obedience.

Gans (1962) describes the phenomenon of European immigrants adapting their culture and institutions to the urban environment. The result is what he refers to as "urban villagers" (p. 4). He goes on to discuss the nature of community within an urban village context; the Italian West End of Boston. He points out that the sense of community was defined by a limited view of the physical and social environment characterized by the relationship to the street on which one lived, and the neighborhood stores one used. He points out that the concept of community related to limited nonspatial factors. The institutions that created the community were "the church; parochial school; formal social, civic and political organization (some of them church-

related), and some commercial establishments" (p. 105). Gans highlights the commercial establishments such as taverns, stores and restaurants as those that serve the "peer group society" (p. 117) as providing meeting places, and the hub of an "extensive communication network" (p. 117).

Gans (1962) describes organizations and agencies beyond the community and peer group society as being part of the "outside world" (p. 120). The entities that make up that world include work, professionals, city government, national society, education and medical care. The West Enders are described as being less accepted by these institutions in the outside world. For example, most of the West Enders turned to local practitioners for medical treatment because hospitals were considered part of the outside world. They avoided treatment and were characteristically afraid of hospitals. Similarly, Gans states that they distrusted police, city government bureaucracy, elected officials and courts. The object-oriented focus of the educational institution, typically found in the public school system, likewise, placed it in the outside world. Politicians were only partly trusted because they moved in and out of the outside world.

Gans (1962) explains that the West End was at the brink

of radical change. Urban redevelopment plans were to tear down old structures, so a new neighborhood could be built. He found that the threat of destruction of their community did not create panic or a heightened activism. The most consistent pattern of response to the changes was predicated on mistrust. A basic mistrust was illustrated through the "us" and "them" dichotomy (p. 231) cited by Gans.

Redevelopment in the West End meant replacement of "slums" with what Gans refers to as "luxury housing" (p. 284). Those who lived in the West End viewed the threat of their displacement as a kind of death; loss of all that was familiar in their world. It was presumed by planners that 60% of the displaced residents of the West End would receive public housing; the rest being served by the private housing sector. Gans points out that this plan had many flaws. He stated that the plans lacked insight into the sociological structure of their families. The plan assumed that nuclear families constituted self sufficient independent family units. There was no regard for "family circles", and the need for relatives to be near on another.

Gans (1962) makes the following recommendations for urban renewal, drawing on his analysis of characteristic behavior patterns, values, and beliefs within the urban

village context: "Redevelopment should be pursued primarily for the benefit of the community as a whole and of the people who live in the slum area; not for the redeveloper or his eventual tenants" (p. 328-330).

The prevailing influences of development, cultural diversity, unfavorable economic conditions for expansion or development of early childhood services, and service delivery flaws, heighten the difficulty of selecting appropriate solution strategies. Despite these difficulties, numerous successful strategies have been implemented in this country and abroad. The focus has been on creative uses of available financial and human resources. An overriding concern in the strategies is empowerment of families at the local level. The literature discusses public and private involvement, as well as national policies and community-based plans.

Hofferth (1989) summarizes national data on specific aspects of the supply and demand for child care among families. She provides a broad perspective of the varying needs, cost and options for care by comparing and contrasting trends of the past twenty-five years. She states that center-based and family day care have shown the greatest increase since 1965, compared to the categories of relative and non-

relative care. She concludes that at the core of problems related to supply and demand is the need for a deeper commitment to the value of childbearing and parenting.

Countries that have made such a commitment on a national level include Cuba and France. These countries have structured linkages between early childhood services and families based on a nationalistic philosophy.

Leiner (1974), in his analysis of the Cuban day care system, compares the population of Cuba to the population of the five boroughs of New York City (p. 5). He further compares New York City's 1800 day care centers, of the time, with Cuba's 50,000, adding that New York City exceeds most United States cities in day care; yet, still is lower than Cuba. He concludes that the United States regards day care as a form of charity; a system of "communal babysitting" (p. 5), or custodial care.

Leiner (1974) did an extensive analysis of education and social change in Cuba, highlighting the changing roles of men and women as equal partners and vital human resources. The day care system is described as an inseparable part of Cuba's national growth and development. As women entered the labor force, new goals and ideals developed. In 1953, only 17% of the labor force consisted of women. Leiner describes how the

"New Cuban Man" ("hombre nuevo", p. 20) replaced the institutionalized concept of machismo, or male dominance and superiority. Economic necessity and social responsibility have forged the principles upon which change is being built. He explains that this commitment to early education is a blueprint for the future. It consists of a comprehensive response to nutrition, health care, compensatory education and community and family needs (p. 29).

Ducrot (1987) describes Cuba's child care system after 30 years of education and social change. He explains that of an estimated 10,246,400 people, 2.6 million are under the age of 14. He adds that teachers and parents regard discussion of education as an analysis of Cuba's future; the two are described as being synonymous. Day care is paid for by parents and the government. Parents are expected to pay only a small portion, while the government pays the largest portion. Ducrot describes preschool education as one of the most costly parts of the educational system in Cuba. Government subsidies are essential to the delivery of these services.

Ducrot (1987) explains that medical care to the expectant mother is free, and mothers are given an 8 week maternity leave at full salary. They also have the option of requesting

a year's leave without pay.

Ducrot (1987) discloses through interviews with a 58 year old grandmother and a 30 year old female dentist with two daughters, that grandmothers are held in high regard. It is implied that grandmothers are part of the solution for helping families cope with occupational and domestic demands.

Sedley (undated) describes the Cuban goal of universal day care. As part of Cuba's effort to reach that goal, they have committed a larger percentage of their Gross National Product (GNP) than almost any other country in the world. She states that the primary aim of the nurseries is to nurture the healthy development in a "collective environment" (p. 6).

Richardson and Marx (1989) cite the findings of the French American Foundation panel that studied the French child care system. They point out that a precept of France's national child care system is best expressed by French President Francois Mitterand in the following statement: "France will be strong in its families and will blossom in its children" (p. 12).

Richardson and Marx (1989) explain that health care is essential to French child care. They point out that after World War II, the National Maternal and Infant Protection Service (PMI) was created to address high rates of infant

mortality, disease and poor sanitation. Richardson and Marx sum up this aspect of French child care by saying: "A child's happiness, and intellectual and emotional development are rooted in physical well-being. Preventive health care is integral to the mission of child care," (p. 26). The cost of this system is shared among public, private, and sources of revenue such as land tax.

Feeney (1990) cites other benefits of the French system including:

1. work leaves for parents in need of time off for family matters.
2. 9% universal payroll tax levied on employers for related social benefits.
3. drop-in, part-time care for parents to have child-free time for errands.

Feeney points out that according to Hiliary Clinton, Chair of the Children's Defense Fund board, the United States has not evolved beyond the belief that families should exclusively be responsible for their children.

Despite the fact the United States lags behind many other countries in its commitment to young children and their families, there are many emerging programs to link families with services. Local efforts, in particular, are part of increasing efforts to respond to the needs of young children on the community level.

Kyle (1987) outlines a blueprint for strategic planning and program coordination to meet the needs of children and families. He asserts that local planning efforts are instrumental in meeting the challenges presented by the nation's rapidly changing demographics. He points out that by 1995, two-thirds of all school children will have mothers in the work force; extended families will be the exception, not the norm; and more than one out of every five children will live in a single parent home. He further explains that, "Children's needs cut across organizational boundaries" (p. 2).

Kyle (1987) refers to specific issues that affect strategic planning and program coordination including (a) the need for a clear grasp of the implications of political will and public will; and how they relate to the needs of children and families, (b) whether strategies for prevention or cure are being endorsed, and (c) the need for careful data collection and analysis; gathering information from local sources such as schools, churches, health departments and public officials (p. 9-12). Kyle (1987) describes local programs that have worked. Two examples are Kidsplace in Seattle, Washington, and the Youth Coordinating Board of Minneapolis, Minnesota. Kidsplace is aimed at attracting and

retaining families following a period of declining population in the 1970's. The plan demonstrates support for children and families through positive child and family centered activities. The annual KidsDay, for example, offers free admission to museums, zoos and buses. Shop owners in the downtown shopping area are encouraged to foster a friendly welcoming attitude. This concept was replicated in St. Louis, Missouri.

The Youth Coordinating Board of Minneapolis is based on the concept of a continuum of service from birth to age twenty. Kyle explains that a joint powers agreement, initiated by Mayor Don Fraser, was implemented in 1986 to provide "a comprehensive set of services for youths from the time they are born to the age of twenty" (p. 17). The Youth Board recognizes the first 20 years as a period of significant development and changing needs. The major objective is to fill the gaps in services "until all the needs are met" (p. 19).

Kyle (1987) recommends that strategic planning and youth coordinating include public-private partnerships or collaborations that can strengthen the planning effort (pp. 196-200). In addition, he suggests that plans be made to institutionalize the effort, so that it lasts longer than a

politician's term of office. Furthermore, services should be provided in a coordinated fashion, suggesting interagency cooperation. Lastly, he recommends that the community be seen as "a viable component of the policy making and program delivery process" (p. 196-200), and all policies reflect a component that refers to children and families; such as a requirement that city planning departments study the impact of new buildings and development on children and families.

Broad strategic planning initiatives such as those referred to by Kyle (1987) are being enhanced by other small scale plans. Hotlines, warm lines, and child care information and referral networks also address the problem of filling the current information gap faced by parents of young children.

Long and Long (1988) describe the variety of hotline models in use throughout the nation. They estimate that there are over 200 just for children at home alone. The variables that differentiate models are hours of service, whether the service is advisory or emergency, and whether volunteer or professional staffing is used. Hotline models include Phone Friend; began in 1982, Kidsline; began in 1983, and Grandma Please; began in 1984.

Long and Long (1988) indicate that an effective hotline should have (a) a pro-family philosophy, (b) consultation and

support, (c) sensitivity to cultural and language differences, (d) close contact with other agencies, and (e) a community-based operation.

Samuels and Balter (1987) indicate that, according to the Family Resources Coalition, there are 41 parenting "warmlines" (p. 27) operating nationally. These warmlines provide a variety of services including guidance and referral for matters related to child development and related needs. Samuels and Balter explain that there are limited options for parents in need of information, and point out that such services provide quick responses in an "informal, non-threatening manner" (p. 27).

Samuels and Balter highlight the usefulness of warmlines by reviewing various ones from around the nation, including "Talkline" (Raleigh, North Carolina, and the New York University Warmline New York City, New York).

Samuels and Balter (1987) describe features of the NYU Warmline in detail. The technology used to handle calls is a telephone answering machine. Taped messages that include names, telephone numbers, and a convenient time to call are responded to by doctoral students from NYU's psychology department. The calls are answered promptly with suggestions or explanations, as required. The caller is told that a

follow-up call will be made if necessary. A log is kept for each call.

Samuels and Balter (1987) analyzed 132 logs to target major areas of concern and gather information on evaluative responses of the parents to the warmline service. Thirty percent of the parents who used the service liked having someone "unbiased and educated" to talk to; 28% liked knowing someone was there to listen, and 26% found the volunteers sympathetic and supportive. They recommend that research be done to better understand how the warmline model can be used to meet the current needs of parents. Staff training is another area that they believe requires further study.

The New York State Child Care Coordinating Council (NYSCCCC, 237 Bradford Street, Albany, NY 12206/516-463-8663) describes the function of child care referral agencies as interpreting community needs, assisting in the development of new services, educating the public for more effective advocacy for services, maintaining a community-wide referral service, and training day care staff and parents.

Sped ing (1989) describes the purpose and function of Child Care Resource and Referral services, also called CCR&R. She points out that they are designed to facilitate access to

information on programs for children. Information is given to parents on day care centers, family day care homes and school age care. They also provide information on summer camps and other early childhood programs. She adds that when the parent calls, requests are taken by trained counselors who provide guidelines for quality programs. CCR&R programs also train family day care providers and offers other technical assistance to employers interested in providing child care services and/or referrals.

The Child Care Action Campaign (99 Hudson Street, Rm. 1233, NY, NY 10013) supplies a listing of California Child Care Resource and Referral Programs. It lists an extensive array of CCR&R services throughout the state of California that are part of a broad network. The network sponsors monthly meetings, technical assistance and training, in addition to resource and referral services.

MacWright (1986) describes the process involved in her development of a community-based child care information and referral clearinghouse in 5 steps:

1. identification of providers
2. compilation of a data base
3. outreach and publicity
4. referral process

5. referral follow-up and evaluation

She developed 4 basic categories for services including child care, medical care, consultants and social service organizations/social workers.

The strategies described in the literature summarize a variety of approaches to the problem of family access to early childhood services and information; supply and demand; the discrepancy of services; dispersed nature of services; and delivery system inadequacies, as well as prevailing influences that will have an impact on chosen strategies. The recommendations emphasize collaborative approaches that effectively utilize human resources.

The review of related literature also discloses that the dominant issues confronting children and families transcend child care issues, intervention strategies and treatment in isolation. The literature suggests that families can no longer be expected to manage all early childhood service needs on their own, within the isolation of the family. Furthermore, the pluralistic nature of the society demands diverse, holistic strategies to assist in the development of families and children through access to appropriate options for services. The literature stresses the timeliness of collaborative, community-based outreach for the coordination of early childhood and family related service information.

CHAPTER III

ANTICIPATED OUTCOMES AND EVALUATION METHODS

Statement of General Goals

Improvement in the existing condition resulted from district families having better access to early childhood services and information. The following general goals were projected for this practicum:

1. to assess the level of need for service and referral
2. to identify dominant needs and available services
3. to develop a procedure to facilitate the coordination of service referral
4. to heighten the awareness of families and planning bodies regarding early childhood issues.

Expected Outcomes

Analysis of district-wide needs began the process of empowering families with the appropriate information to make choices for their children's healthy development. The referral procedure handled requests for assistance/information on the community level. This procedure operated within the organizational structure of the community board management

system, which is designed to handle community complaints and concerns. Furthermore, it enabled families to access information on early childhood related services, both local and city-wide, with greater effectiveness. Planning bodies of the district were expected to direct attention to early childhood issues and concerns. Informal networks were used to assist in the dissemination of information and to raise awareness about the community planning board's referral procedure. A directory of related services was compiled to further assist parents in getting information.

Evaluating Methods and Recording Program Events

A conceptual framework based on strategic thinking and operational planning was used to evaluate the success of the selected solution strategies and implementation. An internal and external audit was used to identify strengths and opportunities. Success was be based on the positive development of these strengths and opportunities for the resolution of the problem as outlined by the writer in Figure 3.

Figure 3. Strategic Thinking and Operational Planning Evaluation

INTERNAL AUDIT

STRENGTHS	POSITIVE DEVELOPMENT (Preferred Scenario)
1. stable community institutions	1. interest and involvement of community institutions
2. local support from community planning bodies	2. local planning initiatives
3. local development, private sector interest	3. private sector involvement; concrete action plans

EXTERNAL AUDIT

OPPORTUNITIES	POSITIVE DEVELOPMENT (Preferred Scenario)
1. new mayoral commission on children and child caring programs	1. new emphasis on interagency collaboration and comprehensive community planning
2. 1990 Census	2. increased attention to diverse community groups and their needs
3. 10 Year Strategic Plan for the county	3. related issues included in report and county-wide initiatives

Four key areas of early childhood service were identified in order to handle diverse needs. An early childhood service referral form was developed which corresponded to the "Citizen Complaint" form used to route all other constituent complaints to specific agencies for "prompt action" (see Appendix D).

The writer maintained a referral log (see Appendix E) of information requests on a monthly basis. The log was used to compile quantitative information on requests for the following types of services:

() Child Care Information and Referral (CCI&R)
ie. group or family day care

() Health (H) and Child Abuse Referrals (CA)
ie. health providers, reporting and treatment services

() Family Services (FS)
ie. counseling, support services, parenting workshops

() Education and Evaluation (EE)
ie. developmental evaluation, special services

Data for the log was taken from forms that are completed as families called in.

The standard for improvement was the effective management of at least 50 requests over the period of implementation. Specifically, the requests from four target groups: new immigrants single parents, teens, and two parent working families were to be tracked by zip code and categories of

need. In addition, the measure of success for the referral procedure was (a) compatibility of the procedure with the community planning board's procedure for handling constituent complaints, as demonstrated by the number of inquiries successfully processed by office staff other than the writer, and (b) appropriate matches of families with information/services, taking into account individual and family differences.

A weekly journal (see Appendix F) was kept to monitor "follow-up" on requests, identify new services, assess accessibility, and set goals. The writer maintained the journal as a qualitative record of program events.

The following criteria were projected to evaluate the general goals of the program:

1. the Youth Services Planning Committee of the Community Board would add early childhood issues to its planning agenda
2. early childhood issues would appear in the minutes of at least 2 Youth Services Planning Committee meetings, and 1 Community Board meeting
3. successful implementation of the referral procedure among office staff other than the writer would occur
4. early childhood information requests would increase

The comprehensive referral procedure was intended to produce a viable model that could be replicated in other community boards. The ultimate goal of the implementation was to institutionalize the procedure.

CHAPTER IV

Solution Strategies

Discussion of Possible Solutions

Based on the review of related literature, many possible solution strategies were identified. These strategies were applicable to the local planning setting of the Community Board, and responded to the social, political, economic, and cultural influences present in the setting. Furthermore, they addressed the three segments of the problem: (a) discrepancy between supply and demand, (b) dispersed nature of services, and (c) delivery system inadequacies linked to multidimensional causes. Finally, the strategies made recommendations for an innovative local model, using strategic planning, and comprehensive, collaborative approaches.

Wingert and Kantrowitz (1990) and Quindlen (1990) documented the fact that arranging early childhood services is a formidable task, even for skilled professionals and child care experts. They explained that the haphazard early childhood information system equally victimizes all families. Quindlen (1990) and Schroeder (1989) urged families to end the

silence about their early childhood needs in order to advocate for an improved system and a national commitment to children and families. Schroeder (1989) endorsed the institution of a national family policy supported by families in partnership with government.

Belsky, Spanier and Rovine (1983), LaRossa (1983), and Curran (1986) discussed the stress related difficulties that compound the problems inherent in obtaining early childhood service information. It was pointed out that parents are highly vulnerable to stress during the transition to parenthood, and more likely to experience role overload that accompanies developmental changes brought on by parenthood (Belsky, Spanier and Rovine, 1983). Time related stress during the transition to parenthood creates the perception that available time is limited (LaRossa, 1983). A positive approach to the social phenomenon of these stress induced constraints, is to (a) view it as temporary, (b) realize that this stress is not a result of failures at family life, and (c) to ask for help in dealing with controllable aspects of the stress (Curran, 1986).

Zigler (1987) and Fiske (1990) described recommendations for information and referral services that help to fulfill the urgent needs of children and families. They also addressed

the need to restructure the existing early childhood infrastructure. Sensitivity to the varying needs of children was suggested, as well as a comprehensive community-based service approach.

Cohen (1986), Edelman (1987), Dalhstrom and Liljestrom (1967) and Kagan (1989) discuss the difficulties that occur when children and families interact with alienating social delivery systems. In addition, the crisis orientation of most delivery systems creates discontinuity as a result of budget fluctuations (Cohen, 1986). Recommendations were made for the replacement of fragmented service approaches with collaborative, comprehensive, community-based systems, so that the full range of needs are served (Edelman, 1986 and Kagan, 1989). The isolation and alienation of the family, in relation to hostile social systems, create problems that have a detrimental effect on human development and the society (Dalhstrom and Liljestrom, 1967). A piecemeal approach to services has created a limited view of needs that, now, require interdisciplinary planning which reflects the unique needs of respective communities (Kagan, 1989).

Goffin (1988) and Kagan (1989) pointed out that the tradition that preserves family privacy also impedes progress toward improved conditions for children and families. The

longstanding assumptions about family self sufficiency deters development of partnerships that could increase the availability of early childhood services and information.

Friedman (1986) recommended partnerships that ease the problems faced by working parents. She suggested that local governments and businesses collaborate in support of families. Friedman (1986) explains that this support can take the form of referral services, warmlines and flex-time.

Gordon (1989) and Nollen (1989) suggested that varied options be made available through referral services and interagency collaborations with community organizations. Nollen (1989) discussed work-family conflict and the need for a supportive corporate culture that provides options such as subsidies, vouchers, on-site or flexible scheduling for working parents.

Naisbitt (1984), Starr (1985), Levine (1990) and Bouvier (1988) described the dynamic influences that could potentially have had an impact on solution strategies. Naisbitt (1984) explains that certain cities and states are centers of innovation. It was implied that these are places to look to for program models. Starr (1985) highlighted the need for leadership, moral insight and strategic planning skills to offset the impending effect of class conflict and the flight

of businesses from the city. Levine (1990) and Bouvier (1988) pointed out that 'graying'; the gradual aging of the city's population, the influx of young immigrants, emphasis on the use of all human resources, pluralism and fiscal constraints were all factors that could shape the course of planning efforts.

Pluralism was also discussed in the literature by Rowe (1988), DiMartino (1989), Polsky (1988), Sholtys (1989), Gans (1963), Glazer and Moynihan (1963), O'Grady (1973), and Footlick (1990). They pointed out that the profile of the American family does not conform to a uniform set of needs, family life orientation, or ethnic identity. These sources identified diverse lifestyles, beliefs and attitudes that require a variety of early childhood service options and service methods. Insights regarding the impact of redevelopment and urban renewal on family life was also noted by Gans (1963) who gives an example of how families in a subculture react to dramatic community changes.

Leiner (1974), Ducrot (1987), and Sedley (undated) discussed national strategies from abroad. They emphasized investment in children and families as a safeguard to national strength and stability. Cuba's national policies endorse locally based support networks that maintain a holistic regard

for the welfare of children and families. Richardson and Marx (1989) discuss the France's positive regard for the education and well-being of the young. The key element in these countries is national commitment and local action.

The literature review also cited some solution strategies that work on the local level. Kyle (1987), Long and Long (1988), Samuels and Balter (1987) and MacWright (1986) discussed local initiatives from across the nation. Kyle (1987) described the concept of a continuum of service from birth to age 20 that has been established by the Minnesota Youth Coordinating Board. This initiative strengthens local commitment to long term planning and comprehensive services. Kyle (1987) also made the point that local efforts should be institutionalized so that they last longer than a politicians administration. Long and Long (1988) and Samuels and Balter (1987) cited the success of hotlines and warmlines that provide sensitive, appropriate, community-based support for families through telephone consultation, information and referral services. These services are said to meet an urgent need of parents for information that is offered in an informal, nonthreatening manner. MacWright (1986) and Spedding (1989) described the process for developing a community-based child care information and referral clearinghouse. All the strategies

reflect a local commitment to providing information to benefit families with young children.

Description of Selected Solutions

Selected strategies were collaborative, comprehensive and community-based (Zigler, 1987; Fiske, 1990; Kyle, 1987; William T. Grant Foundation, 1988). Emphasis was placed on a continuum of service and early intervention (Kyle, 1987; Blackman, 1986; Kiernan, Jordah and Saunders, 1984; William T. Grant Foundation, 1988). The church and other community institutions were regarded as community resources (Basler, 1988; Yamada, 1990; Glazer and Moynihan, 1963; O'Grady, 1973; and Gans 1962). The problem of getting services was looked at broadly to include interagency and private sector involvement (Gordon, 1989; Nollen, 1989; Kagan, 1989). Advocacy and government support were sought to improve the quality and availability of services and information (Schroeder, 1989). Time and family role responsibilities were considered in the design of strategies to meet the most urgent related needs and individual differences among families (Footlick, 1990; Rowe, 1988; DiMartino, 1989; Belsky, Spanier and Rovine, 1983, LaRossa, 1983; Nollen, 1989; and Curran, 1986; and McCoy, 1987). Intervention to meet the special needs of families was also part of the solution strategy

(Kiernan, Jordan and Saunders, 1984; Schroeder, 1989; Belsky, Spanier and Rovine, 1983; LaRossa, 1983; Quindlen, 1990; Bode, 1980; and Bode, 1987). There was a holistic regard for children's needs (Committee of Economic Development Statement on National Policies, 1987; Edelman, 1987). Ethnic and cultural differences were given attention in the method of implementation (Rowe, 1988; Sholtys, 1989; DiMartino, 1989; Glazer and Moynihan, 1963; O'Grady, 1973; Gans, 1962). For example, Gans' description of the "outside world" was used understand the need for community residents having services and information that were not outside of the community.

A telephone consultation line, or "warmline" (Samuels and Balter, 1987; Long and Long, 1988) was implemented to introduce the community to the community planning board, and allow families to locate needed services. The service was interchangeably "advisory" and "emergency", as needed. The referral procedure facilitated access to information (Spedding, 1989), assisted the development of new services, and educated the public. A referral form was adapted from the "Citizen Complaint" form used by the community board staff. The staff was given an orientation on the new form and the appropriate agencies for referral.

MacWright's (1986) 5 steps were used to plan and

implement the referral procedure:

(1) identification of providers
(2) compilation of a data base

A listing of local and city-wide early childhood service providers was compiled. Letters of introduction were sent to the agencies and service providers to explain that the community board would be forwarding requests and referrals for "prompt action". Hospitals, nutrition programs, counseling services, and teen parent service agencies were also sent a letter regarding the practicum objectives.

(3) outreach and publicity

Press releases were sent to ethnic and community newspapers, school Parent Associations, Parent-Teacher Associations, Home-School Associations, churches, social organizations, civic associations. Key individuals were contacted to disseminate information to informal kinship and friendship networks resulting in word-of-mouth referrals. Translations were done by the various contact people through their word-of-mouth referrals and reprints of the information and announcements.

(4) referral process

The community board staff were trained in the referral procedure (forms, process of locating service providers by category, etc.). Information requests and referrals were recorded on the referral form, and when necessary, a letter

went out to facilitate prompt action for the caller. A telephone answering machine operated after 5:00 PM to facilitate requests from working parents. They were asked to leave their name, address, (day) telephone number, and type of service needed. Requests received a number and were logged in, compiled and maintained in a file by the Youth Coordinator. The Youth Coordinator handled most of the requests; however, the community board staff had opportunities to handle them as well.

(5) referral follow-up and evaluation

With some exceptions, the families made direct contact with the various agencies. A follow-up letter went out to the agency on the family's behalf when there were language barriers or other difficulties. Families were telephoned to find out if the referral was helpful. They were also asked, (a) how did you find out about the community board referral service? (b) how do normally get information on early children services? (c) are you willing to travel outside of your area for service?

A youth service resource directory was prepared and distributed to individuals and community-based organizations upon request. A press release announced the availability of the directory. As part of the goal of

heightening awareness of families and planning bodies regarding early childhood issues, developing new services, and educating the public; the writer submitted the practicum report to be included in the 10-Year Plan for the county, it was also given to the Youth Services Planning Committee, the Department of Youth Services supervisors, colleagues, community leaders, educators, politicians and local advocates. The abstract will be used to summarize the report in press releases.

One critical part of the implementation was the development of a series of mailing lists that included a broad, collaborative network of contacts. Collaboration, again, was the key to the success of the implementation because there were no additional funds to initiate independent referral services. Drawing city-wide services and information into the community district, while raising awareness of local services, produced linkages and a good foundation for advocating for increased services. The strategies also recognized the value of community institutions such as the church, school and informal networks.

The community board's open system design, focused on community input, and its local planning role were conducive to the introduction of the referral procedure. The long term

benefits to the community, as a result of the emerging early childhood needs being addressed, will undoubtedly be a positive regard for families, long term planning initiatives, and increased retention of families with children in the community.

CHAPTER V

RESULTS

Overview of the Project Goals and Outcomes

The practicum project responded to district-wide early childhood information and service gaps experienced by community families. The main goal of the practicum was to develop a procedure to facilitate the coordination of service referral on the community level, while heightening awareness regarding early childhood issues. Prior to implementation, a large constituency of families utilized haphazard methods for locating related early childhood services. Most relied on word-of-mouth referrals from friends, relatives and neighbors. Among early childhood service providers themselves, there was no cohesive network for information to facilitate access even to community-based services.

Linkages of the targeted families to the Community Board were virtually nonexistent. Also, early childhood service providers were not represented on the Youth Services Planning Committee; hence, early childhood information and service needs were not represented. As a result of the

implementation, special attention was given to this deficit by the Chairpersons of the Youth Services Planning Committee and the Community Board.

The selected strategies assisted parents in negotiating services to promote the healthy development of their children between birth and age five. A comprehensive community-based referral procedure was implemented to promote access to existing services, while information was shared to increase awareness about the need for high quality early childhood services.

The strategic plan of action used stable community institutions as channels for outreach to those in need. Mailing lists were compiled from those who were involved on all levels of the implementation, including families who called for assistance, babysitters, guidance counselors, service providers, store owners, and PTA presidents.

All the standards for improvement were met. Eighty requests were received and processed, and early childhood service issues appeared in Youth Services Planning Committee meeting minutes and Community Planning Board meeting minutes.

A prevailing problem was the fact there was no way to count families that were helped indirectly by those who

obtained information from the referral procedure. When a follow-up was done, a majority of the families reported that they shared the information with friends, neighbors and relatives. The undercount, however, is regarded as another measure of the procedure's success, indicated by the ease with which the information was circulated through kinship/friendship networks.

Results.

Figure 4 indicates the results of the procedure. Six indicators were used to develop a profile of those who used the procedure. No data was gathered on citizenship status, country of origin, family income or family status because it was felt that questions to elicit this information would be considered intrusive. Also, the number of teens served through the procedure could not be ascertained because direct service was not given to this group, except in a few instances. In general, guidance counselors and community volunteers relayed the information to these groups.

Figure 4. Results of Implementation Based on Six Indicators.
Total: 80 Requests

1. Age of Children.

Infants	Toddlers	Preschoolers
17	20	43

Note: Age of youngest: 2 months; oldest 5 years

2. Zip Code.

A	B	C	D	*Other
28	2	6	19	25

Note: *Those living outside the area needing service in the area

3. Service.

CCI&R	EE	H	FS	CA
76	2	2	18	1

4. Ethnic Surnames.

Spanish	Irish	Asian	Italian	Other
26	9	10	13	22

5. Sex of person making request.

Female	Male
73	7

6. Outreach Method Results.

Newspaper (PSA)	Informal Network	Formal Network	Flyers
11	27	22	20

Note: Number of responses per method.

Conclusions.

At the beginning of the implementation, 50 families were surveyed, and 48 felt that more needed to be done to make child care and related services available. The findings in Figure 4 represent another sample of 50 families. Both groups indicated that "middle class" and "working class" families needed help with finding and paying for child care. Child care, family support, health and evaluation were among those services for which there was expressed need. Prior to implementation of the referral procedure, requests were handled without benefit of a data base from which to make appropriate referrals. The service and information deficits were presumed to be responsible for large numbers of young children being at risk for child abuse and school failure, as well as being unsupervised or in substandard care.

Feedback from families indicated that they were concerned about a lack of quality, affordable child care and health services. The referral procedure gave them an opportunity to articulate this need.

Impact Assumptions and Outcomes

The writer's causative analysis revealed

diverse influences that contributed to the problem. These included social, political economic and cultural influences that were manifested in outcomes including:

1. the lack of comprehensive, coordinated, community-based referrals
2. family isolation
3. limited availability of services/information, restrictive eligibility requirements and targeting
4. cultural attitudes that reinforced resistance to asking for help/approaching things that are unfamiliar

These influences would have been formidable obstacles to overcoming the problem. It was, therefore, understood at the onset that the process would be a gradual one, taking into account a strong undercurrent of resistance to change. Language barriers, patterns of passive coping, fear and distrust of the unfamiliar could have easily undermined efforts to improve the situation. However, the intervention strategy addressed these influences by making the information **and service**

1. easily **attainable**
2. **friendly** and **familiar**
3. **respectful of differences**
4. adaptable to **self-sufficient use**
5. **transferable**

The implementation gave a positive regard to self-sufficient use of the information, making it possible for families to comfortably negotiate services for their own children; hence, allowing families to be empowered rather than "indebted."

The limitations of eligibility requirements and targeted services were overcome in the implementation by gathering the most current and accurate information from the network of providers. Successful matches of families with services, based on focused needs and clear program information, reduced the frustration caused by inappropriate referrals.

Market Assumptions

Based on available data on the demographics of the area, specific groups were targeted for the implementation. Four main groups were in greatest need of assistance. Those groups were:

immigrant families

single parents

teen parents

two parent working families

The market assumptions were that these groups would (a) make the greatest use of the referral procedure, (b) have

diverse individual needs, (c) require comprehensive services; a kind of "one-stop shopping", and (d) be difficult to reach through conventional outreach methods.

The results of the implementation indicate that most of the requests came in for child care information and referral for preschoolers (between 3 and 4 1/2 years), in the " A " zip code area. Requests were most often made by females with Spanish or "other" surnames, and responded to the informal network outreach method. When asked, most indicated that they had no main source of early childhood information. The implementation responded to this deficit, and in the words of one mother, the lists and information were like a "bible." Overall, the findings support the fact that the market assumptions were correct.

No other community-based service provider dealt with early childhood service referral, or handled requests in a comprehensive, holistic way. Neither was there a service that did systematic outreach through the concurrent use of informal, kinship/friendship networks and interagency contacts. Furthermore, the procedure produced linkages between constituents and service providers that helped to improve the condition.

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Delivery System

A critical element of the delivery system was the fact that it was "user friendly." Furthermore, it provided prompt, appropriate responses. Requests were handled with openness, warmth, courtesy, clarity and promptness. The process for carrying out these features of the delivery system included the following:

1. Each constituent was spoken to in a friendly, accommodating tone and was thanked for calling.
2. Information was taken down on a request form that was used to record pertinent details about family needs, anecdotal information, and mailing list data.
3. A form letter (see Appendix F) accompanied each mailing of information to maintain uniformity in the quality of service and information that went out, as well as maintain a record of action taken.
4. Same day service was the goal in each instance.
5. Follow-up was done and families were encouraged to call if they had any questions about the information.

This process provided a "helping hand" without judgment or intrusiveness. Positive interaction and useful information served to encourage trust and confidence.

Cost Analysis

Cost analysis was not a major issue in the implementation of the procedure because it was carried

out within the Community Planning Board mandate to serve community residents. No separate funding mechanism was needed to implement the procedure. In effect, it increased the number of constituents who were served.

The implementation resulted in greater use of postage, photocopying and telephone. Costs could be estimated at the following rates per request:

copies @ $.10 ea.	$1.80
postage	.65
telephone	1.55
envelopes, forms	1.50
TOTAL	$5.50

The estimated cost involved in serving each constituent was roughly $5.50. Over the period of implementation, 80 requests were handled at an estimated total cost of $440.00.

There are no estimates of how many additional people were served from each mailing. It is clear, however, that the benefits far exceeded the cost because other interventions, such as reporting and treating child abuse and neglect, as well as providing remediation all are far costlier.

The current rate of funding for youth services is

$6.50 per capita; none of which goes for services to young children between birth and age 5 in the community district. Youth services funding targets programs for school-age, adolescents and young adults. The implementation redirected Community Board service dollars to a portion of the youth population that is grossly underserved.

Resources

The practicum made maximum use of available human resources, interagency contacts and program information, as well as the office computer and other office equipment. The office telephone answering machine was used to receive calls that came in during non-office hours. Human resources consisted of informal and formal network contacts from the community and city-wide agencies.

The formal network was made up of early childhood service providers, advocates, community planners, monitoring agency representatives, school personnel and elected officials. The informal network consisted of those who were served by the procedure, playgroup participants, the clergy, parent-teacher and home school presidents, merchants, civic association leaders, and grandparents.

Interagency collaboration was initiated with a letter of agreement (see Appendix G) that explained the goals of the procedure. Each agency was asked to sign the agreement, or simply place the Community Planning Board on their mailing list for information. The agreement established a cooperative relationship that enabled the writer to intervene when the family lacked confidence or experienced a language barrier. Information from these contacts made it possible to prescreen families, advise them of the best times to call, or refer them to a specific contact person within the agency. Agencies understood that the aim was to help the greatest number of families negotiate services.

Prior to implementation, the agencies had been part of a strategic planning meeting entitled, "Meeting Early Childhood Needs in the 1990's." This meeting, which was held during "Week of the Young Child" (April 1990), began a collaborative relationship between city-wide service providers and the community planning board. When the same individuals were reached to request their support for the referral procedure they already had an appreciation for the goals of the project.

The support of both informal and formal networks

enhanced the implementation. They supported the project with publicity and word-of-mouth referrals to the procedure.

Local news editors were also helpful in letting people know about the procedure and related issues. A series of articles were run by one local newspaper, keeping early childhood services in the public eye.

Community Planning Board staff offered valuable support by routing all early childhood service related requests to the Youth Coordinator. Without their cooperation the sometimes unclear requests from families would have been lost. On occasion, family members would call and ask, "Is this a child care center?" If the staff interpreted this as a "wrong number," many requests for information would not have been filled.

A computer data base of clients, mailing lists, and program information made it possible to easily add, correct, revise and update information. During the period of implementation, four updates were done to reflect an increase in community-based services, additions to the informal network, and revised program information.

Guest speakers and consultants addressed the Youth

Services Planning Committee and local groups to let them know about changing needs, initiatives, vacancies and locations of centers.

An Early Childhood Network consisting of parents, service providers, agency representatives and elected officials was begun to further develop human resources. Monthly meetings were agreed to, and the following goals were decided upon by participants at the first meeting:

1. To know what services are available.
2. To get or exchange information on resources for trips and activities.
3. To collaborate with programs that have staff that speak other languages, thereby improving service delivery to the diverse population of clients.
4. To reach those in need.
5. To find low cost transportation for programs.
6. To uncover information on grants and donations.

The Youth Coordinator assigned to the Community Planning Board was a necessary resource for the implementation. The Youth Coordinator's responsibilities included data collection on needs, management, leadership and coordination of the procedure. The Youth Coordinator provided technical assistance to developing early childhood programs, including two local playgroups that began during the period of implementation; a new early

childhood center; and school-based parent coordinators in need of community resource information. These are all prescribed functions of the Youth Coordinator whose role dictates this type of local involvement on behalf of children.

The Youth Coordinator was known to an extensive network of individuals, civic associations and community-based organizations. Partnerships, linkages and referrals were made through this network to lessen the impact of service gaps and a delivery system problems.

Volunteer members of the Youth Services Planning Committee helped in the implementation of the procedure by sending related literature, updates, early childhood service information, etc. A librarian on the Committee sent pamphlets for parents on how to select a child care program. Volunteers also made "word-of-mouth" referrals, distributed flyers, and included information on the procedure in local bulletins and newsletters.

During the implementation, the Youth Services Resource Directory for the Community Planning Board was updated. Copies were reproduced for distribution by the Department of Youth Services. This became a valuable resource for many groups and individuals.

Management System

The style and structure of the management system were designed to respond to the ongoing interchange between the environment, or community, and the Planning Board. Given the diverse environmental input and the holistic focus of the procedure, the management system had to provide a wide spectrum of information and referrals in a streamlined, clear cut, and accessible fashion. This was accomplished through the development of (a) a computer data base to centralize information on programs and various networks, (b) a file system from which copies were made for mailing to families, (c) request forms to record data (address, telephone, needs, child's age, etc.) and "action taken", (d) response forms that contained a checklist of what information was sent, and (e) comprehensive lists of services.

The management style provided flexibility within a defined structure making it possible to serve families in a friendly, prompt and effective way. One mother, for example, called for assistance in locating a playgroup for her 20 month old daughter. The request was processed on a Friday. She received the information and enrolled

in a recommended playgroup a few blocks from her home on Monday. Before contacting the Community Board, this mother, who had lived in this community for less than a year, travelled a long distance to her old community because she couldn't find services. She was quite pleased with the information and said so at an Early Childhood Network meeting.

In another instance, a Spanish dominant mother who worked part-time called for information on a program for her language delayed 4 year old. In less than 15 minutes, after hearing what the mother needed, a call was made to a nearby Head Start program to see if there was a vacancy. As it turned out, there was and the mother was called and told to contact the family worker at the Head Start program. The mother expressed her gratitude for the assistance. In addition, a mailing went out to the mother to let her know about other related services.

Information was controlled and managed by a system whereby each call or request was logged in and given an identification number. The data from request forms were entered into the computer. The requests were done in duplicate and stored in a 3" binder. A copy of the response checklist, indicating what information was sent

out, was inserted behind each request. This method of storing and controlling information made service delivery more effective. At any given point during the implementation, the writer was able to retrieve details about how a family was served.

A weekly journal form was used to monitor the implementation. The journal form specified weekly goals, planned follow-up, special events, successes and concerns and enabled the implementation to be developmentally self-correcting. For example, when it was found that public service announcements appearing in local papers were not reaching the targeted groups, other channels for outreach were sought. Flyers were, then, disseminated at newsstands, laundromats and fast food restaurants. This method of outreach yielded positive results.

In every instance, callers were asked how they found out about the community board. In many cases it was from flyers, in Spanish and English, that appeared throughout the community.

The average request was managed within 15 minutes. In that time, the information was taken from the caller, the file was used to gather appropriate information, a response form letter was completed and copied, and the

envelope was addressed, stamped and placed in the "out" box.

Rapid handling was made possible with the help of the file which consisted of the following categories:

() Agency Literature-brochures, fact sheets

() Advocacy-legislative updates, policy information

() Articles-related articles from newspapers, magazines

() Babysitters-a listing of community-based caregivers

() Correspondence- "In/Out" relative to procedure

() Cover Sheet-explaining ways to share information

() Fact Sheets-description of procedure

() Family Support-information on services

() Flyers-hand-outs to publicize procedure

() Grants-opportunities to share with network

() Health-information on services

() Hotlines-emergency numbers

() Immigration-advocacy information

() List of Day Care Programs-within district

() List of Early Childhood Services-city-wide

() Playgroups- program information/how-to information

() Response Form Letters-copies

() Support Groups-list of available services city-wide

() Teens- information for pregnant/parenting teens

() Translation Request-form to multilingual groups

() Updates-federal, state, city developments/initiatives

() Voucher-information on subsidies for child care

During times when calls were slow coming in, copies were made and the files were maintained. In addition, new data off of the request forms were entered into the computer data base and follow-up was done.

A copy of the flyer describing the referral procedure was enclosed with each response, along with a cover sheet (see Appendix H) that asked the person to tell others about the service. Groups and individuals who dealt with multilingual populations were sent a form asking them to translate the information.

The management system made it possible for the Youth Coordinator to handle other duties, in addition to the early childhood referral procedure. There were no problems associated with neglect of other youth related responsibilities.

Political Dimensions

A variety of threats and opportunities presented themselves during the implementation of the procedure. The political climate changed from initial support for innovative strategies to address the growing need for

early childhood services, to cautious conservatism in the space of few months. This dramatic shift was caused, in part, by a down turn in the economy. Political commitments were diverted by a statewide fiscal crisis that had serious repercussions on the city level. Threatened cuts, for instance, put Youth Coordinator jobs in jeopardy. Furthermore, a joint powers agreement between the Department of Youth Services and Community Boards had an adverse impact on the role of the Youth Coordinator in the Community Planning Board where the implementation took place.

In contrast, opportunities arose from the passage of the national child care bill, and an emerging private sector interest in making investments in early childhood to ensure a competent workforce and increase employee productivity. Public-private partnerships, national initiatives and grassroots movements balanced out the threats. For example, Kiwanis International and their local chapters identified services for children between birth and five as part of their Major Emphasis Project (MEP). In addition, the trend of mothers in the workforce carried a momentum that engulfed those who faltered on decisions whether or not to respond to the

growing need for early childhood services.

A mayoral commission on children, youth and families was part of the plans for new, child-centered city policies. Fiscal constraints within the city limited the investment in new planning efforts.

The public schools began to focus on the needs of parents. They developed parent involvement programs staffed by specialized personnel with such titles as parent coordinator, parent facilitator, and bilingual coordinator. These staff people heard an outcry for early childhood services. The public schools also formed collaborations with colleges and universities to respond to the early childhood service needs of parents. One such collaboration produced a parent newsletter called Work and Family (Bank Street College, NYC).

Funding cuts did not deter the implementation or related services because there was little or no public funding of early childhood services in the community district. City-wide public monies continued to target public assistance families and low-income minority families; hence, the area was ineligible.

State funds, in the amount of about $200,000 went toward the development of a new early childhood center

that will provide child care to employees of a local company. Community families will be offered slots on a sliding scale. Given the cost of quality child care, $200,000 from the state could only be considered "seed" money.

Despite the fiscal crisis, the community district increased services as a result of private initiatives and individual grassroots organizing. Three playgroups were started. In effect, the "public will" (Kyle, 1987) proved to have a positive impact.

The implementation relied more heavily on the public will because "political will" (Kyle, 1987) was focused on conservative, short-term, targeted services and intervention. In contrast, the public will supported long-term investment strategies, prevention and responsive local delivery systems.

Unique Characteristics and Problems

During the first week of implementation, calls came in from women who were providing child care in their homes. They referred to these services as "babysitting." At the same time, mothers with modest incomes requested babysitters, not licensed family day care or group care. This presented an ethical dilemma because the

babysitters, for which families were clamoring, were unmonitored and unlicensed. Families wanted babysitters to be close by or to come to their homes. These families could not afford licensed group or family day care. Affordable care was mostly underground. Quality care was not affordable and affordable care was not always quality care.

The first caller, in fact, suggested $3.00 per hour as the amount she was able to afford for a babysitter. She was returning to work on a part-time schedule, and felt it would not be worthwhile if she had to pay more.

In response to this problem, babysitters were given information on training and licensing of their services. Some were responsive, but others felt that the training was offered in a "bad area" and they didn't wish to participate. However, one mother who was given this information completed training and became a certified family day care provider.

Another problem that surfaced during the implementation was that school-age siblings needed care. The writer referred these families to listings of after school programs and other community-based youth activities. In many cases, family plans were contingent

upon both school-age and preschool age children siblings both having a child care arrangement. This increased the difficulty of negotiating services to meet family needs.

As mentioned earlier, another characteristic of the implementation was that families who were served by the procedure shared information with friends. Although fifty requests were handled in the community planning board, probably hundreds more families benefited from the implementation. There was no way to get an accurate count of those who were served. The writer regards this as one measure of the procedure's success, despite the fact that it hindered efforts to get an accurate measure of those served by the procedure.

Guidance counselors, parent involvement staff and education directors called for information. Here, again, large numbers of pregnant or parenting teen, single parents and new immigrants were probably served. Language barriers and apprehensions were reduced when a trusted individual provided the information or translated it.

Families from other community planning boards heard or read about the procedure and called for information. They wanted to know what services were available for

children. Some lived in other areas, but wanted care in the community where they worked.

A few families called with specific needs for child care generated by family crisis situations. In one instance a mother called because her husband had undergone heart surgery and she wanted her young child to be diverted from the father's health crisis. The mother explained that she had to care for her husband and she didn't want the child exposed to that on a daily basis without another outlet. In another case, a family counselor telephoned about a family in which a father had recently died. She requested information on services for a 3 year old. A sibling in the first grade was also in need of child care services. The mother planned to return to work and she needed information on job training. In each of these referrals, a variety of services and agencies had to be contacted. A referral was made to the local network for displaced homemakers for the second mother, along with referrals to after school and day care programs. Both families needed extra guidance and assistance to negotiate services because of the stress caused by their respective family crises.

A somewhat problematic aspect of the implementation

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was the fact that the community board staff did not utilize the procedure, although they received an orientation. They referred the calls, but did not fill the requests. However, the was evidence that they gained greater familiarity with the need for early childhood services, but presumably felt that it was part of the exclusive domain of the Youth Coordinator. It would probably be in the best interest of community constituents to have early childhood services integrated under the broad category of city services and handled in the same way as other complaints and requests for service. In this way, city agencies such as the Agency for Child Development and the Bureau of Day Care would be the agencies to which community board referrals would be made, and requests would be 'mainstreamed.'

In general, the unexpected events helped the practicum project to develop in a meaningful way. Most needs were anticipated; however, those that emerged unexpectedly were responded to in accordance with the goals of the practicum project and helped to enhance the impact.

Evaluation Strategies

The purpose of the evaluation was to assess the

level of success in meeting the identified goals of the procedure, and to gather information on the overall response of families to the procedure.

A telephone survey of families served by the referral procedure unanimously indicated a favorable response. Families were asked the following four questions about the information and service:

1. Did you use the information?
2. Was it helpful?
3. Did you locate services using the information?
4. How could the referral procedure have been more helpful?

Answers to questions 1-3 were all "yes", and there were individual comments and observations about early childhood services and the information that were dispensed through the procedure:

"made me feel terrific to have information"

"something to reach for when I need information"

"a bible...I wish I had the information sooner"

"very helpful"

"I carry it every where I go."

"Services were too expensive."

"[Services] cost too much."

"I shared it [the information]"

"gave it to a friend"

"leaders don't care"

"you don't get help if you're middle class"

"if you're born here, you don't get funding"

Specific suggestions for improvement were given in response to question 4:

() information on scholarships and/or income eligibility would have been helpful

() more infant and toddler child care services are needed

() should publicize the procedure more

() family day care training was in a "bad area"

() many services were "too far"/"no one wants to go on the subway"

The four major goals of the procedure were met in the following ways:

1. dominant early childhood needs were identified.

Among the 80 families that were served 17 needed child care for **infants (0-18 months)**, 20 for **toddlers (18-36 months)**, and 43 for preschoolers (3-5 year olds). The youngest child for which care was requested was 2 months old. Among most of the families with infants and toddlers, child care was needed because a parent had to return to work, or seek employment to increase their family incomes.

Families expressed the need for <u>affordable, accessible, quality care</u>. The cost of care was considered prohibitive. If families could manage the cost, they usually had difficulty finding it in their neighborhood. Finally, if they could afford it and it was nearby, it either lacked quality or had no vacancies.

The demand for nontraditional hours grew during the period of implementation. Some families needed care for overnight hours, or during varying shifts.

School-age child care was linked to preschool age needs because, in some cases, one arrangement was contingent upon the other. One mother said that she appreciated the information on preschool programs, but if she couldn't get a suitable arrangement for her school age child, "it wouldn't work."

2. 80 Requests

Approximately 47 of the 80 families who called for assistance had never called the community planning board before.

When asked how they usually got early childhood information, they said from friends or the newspaper.

Prior to implementation, the 80 families had no single, comprehensive, community-based source of information.

3. Early childhood services planning

An early childhood network was started during the implementation. This brought together service providers, parents and advocates to do planning for meeting district-wide needs.

For the first time in over two years, a chairperson of the Youth Services Planning Committee requested that the Youth Coordinator get a guest speaker to address the topic of early childhood needs within the district.

4. Discussion in minutes of Youth Services Planning Committee and Community Planning Board

Discussion of early childhood services came up at 2 Community Planning Board Meetings. On one occasion, a community board member spoke about the need for early childhood services, and the vice chair asked the Youth Coordinator about the level of need. The Youth Coordinator cited the findings of the survey of 50 community families.

This topic also came under discussion as part of the community demands for an amenities package to accompany redevelopment within the district. The Youth Coordinator gave testimony on this issue at two hearings.

The Youth Services Planning Committee minutes reflected ongoing discussion, throughout the implementation, on early childhood needs. This culminated in guest speaker presentations on the city-wide Information and Referral Unit of the Agency for Child Development, and Teen Pregnancy Prevention services for the county. Early childhood related issues appeared in 5 meeting minutes of the Youth Services Planning Committee.

The weekly journals were used to articulate weekly objectives, an overview of service/events, planned follow-up, successes and concerns. The information from the successes and concerns provided evaluative data. The following are highlights of results gathered from those categories starting at Week 1 of the implementation:

Successes

1. A client called back to say she made positive contact with 2 prospective caregivers.
2. A major city-wide agency agreed to "sign-on" to participate in the procedure.
3. Three playgroups started in three different areas of the community district.
4. Calls came in as a result of public service announcements and flyers.
5. The YSPC Chairperson asked for a guest speaker on day care/early childhood services.
6. The executive director of a community development corporation called to express interest in starting a

support network for infants and toddlers in one area of the community district.

7. The Community Planning Board recommended implementing a day care plan under FY'91 expense budget priorities and requests.

"Description/Justification: Because of a large immigration of families with younger children into the community board...census data reflects a rapidly growing population of pre-school age children. As many women enter the work force daily, the need for pre-school day care increases. At present there are no day care centers in the community...providing full and on-going day care services for working parents that offer a sliding scale dependent on the family's income."

Responsible Agency: Human Resources Administration
Program: Day Care/Head Start.

8. Cooperating agencies sent computer print-outs of available licensed child care by zip code and type of service.

9. Speaker from a teen pregnancy prevention program made a presentation for the YSPC.

10. Positive responses were received to the first Early Childhood Network Meeting; they decided to meet again.

11. The director of a new private center asked to become a part of the Early Childhood Network.

12. PTA's published information on the procedure/calls came in.

13. The owner of a laundromat where flyers were placed called to offer to display any early childhood service information.

14. A member of the YSPC referred a school-based teen pregnancy prevention program to the procedure.

15. Families reported that the city-wide Agency for Child Development was very responsive and helpful/

guided them through the process.

16. The Early Childhood Network had four monthly meetings and produced a directory of local early childhood services.

17. A presentation was made to the local Kiwanis to identify possible projects for their early childhood initiative.

18. The supervisor of the Early Childhood Community Coordinating Council invited the youth coordinator to make a presentation on the procedure.

Concerns

1. Many requests came in for family day care, "babysitters" and voucher slots, but there were not enough of them.

2. Some callers didn't understand the term "early childhood services."

3. Difficulty reaching and identifying single and teen parents.

4. Budget cuts threatened the Youth Coordinator position.

5. Early childhood center staff had difficulty getting away for meetings because of staff shortages.

6. Staff not using procedure, they refer it to the Youth Coordinator.

7. Request identification number needs to appear on the response form letter, so it can be tracked more easily when follow-up is requested.

8. Voucher subsidies for child care were issued, but there were not enough slots/vacancies.

"Successes" exceeded "concerns" throughout the

implementation. Each concern was developed into a weekly objective or plan for follow-up, so the negative results were minimized. For example, when there was an indication that not enough was being done to reach single and teen parents, special mailings and distribution of flyers went out to libraries, high schools, community colleges and members of the informal network who worked with these special populations.

The practicum accomplished all the major objectives. Efforts to support families, as well as create partnerships and linkages to benefit young children were successful. Some families requested more than one type of service, but the majority of the requests were for Child Care Information and Referral (CCI&R). The results were as follows:

1. Child Care Information and Referral (CCI&R)	76
2. Educational Evaluation (EE)	2
3. Health (H)	2
4. Family Support (FS)	18
5. Child Abuse (CA)	1

Family Support (FS) was the second most commonly requested category of need. Twelve requests were made for both Child Care Information and Referral and Family

Support; 2 for Health and Family Support; and 4 for Family Support services alone.

Poor economic conditions on all levels of government inhibited institutionalization of the procedure and support for the concept of a continuum of services from birth to twenty (Kyle, 1987). Despite the lack of funds for new initiatives and programs, the implementation proved that families and young children could be effectively served in a comprehensive way through a collaborative, community-based procedure.

Recommendations.

The **need analysis**, **market assumptions**, and **impact assumptions** were all accurate. Families continually repeated concerns that were identified in the problem description.

The referral procedure has set a process in motion that will persist beyond the implementation period. Families continue to call the community board for early childhood service information. The information currently in circulation within the community will have a 'time-release' effect because families have been sharing the information, and those who were directly served by the procedure got positive results. Still others will call

because they find a random copy of the flyer describing the procedure. These requests for early childhood service information will help to institutionalize the procedure on a small scale, in spite of poor economic conditions and waning political interest.

Child care and child care advocacy went hand-in-hand. Likewise, family support and family empowerment went together. The situation of limited supply of services and growing demand, prior to implementation, inspired feelings of hopelessness and powerless among families. The procedure helped families to overcome these feelings through positive action and positive results. The playgroups were a direct result of local advocacy and empowerment. They were supported by the Youth Coordinator with information and technical assistance. Although small, this growth of services inspired greater commitment to increasing community-based, accessible, affordable, quality services for children (see Appendix I).

Parts of the implementation provided insights for future planning. For example, the Family Matters Conference site was the Parish Center in a Catholic Church, on a Saturday morning. While handing out flyers

for the event, a Muslim mother told me she didn't wish to go to the church, even after it was explained that the church did not sponsor the event and that a conference space was being used. Other problems with attendance arose because many families were busy with household chores. It is possible that there is no ideal time or place, but it would be better to have the event in a setting familiar to parents such as a school or child care center, with no implied religious affiliation.

At the present time, the referral procedure is available only in the community planning board where the practicum implementation took place. It has been proposed to the Commissioner of the Department of Youth Services that the procedure be adopted by the other 58 community planning boards. Current fiscal constraints and staff lay-offs make this unlikely. However, it should be noted that the procedure provides an effective method for managing information to enhance service delivery among agencies, maximizing on the use of human resources rather than additional financial resources.

The implementation required no additional funding, only effective coordination and use of available human resources. The procedure can be implemented at no

additional cost to community planning boards, and have the impact of bridging service gaps that are prevalent in most communities. A residual benefit from implementing the procedure was that it provided an excellent opportunity to gather data on community needs. Next steps should include a gradual synthesis of the early childhood referral information and planning network into the community planning board constituent referral system and youth service committee/network. The ultimate goal should be to produce a community-based planning network that endorses a continuum of services from birth to twenty; hence recognizing the continually changing needs of the young.

Specific recommendations for replication of this procedure include the following:

1. provide friendly service
2. give prompt action
3. streamline response procedure
4. update information at regular intervals
5. maintain weekly network exchanges by mail or telephone to encourage growth
6. follow-up and get feedback on service and changing needs
7. expect that the "warm line" will be an important link for some families to the "outside world";

or a means to overcome isolation

Dissemination.

The practicum report was submitted to the Youth Services Planning Committee of the Community Board, Department of Youth Services, the Mayor's Office for Children and Families, the Executive Director of the Temporary Commission on Early Childhood and Child Care Programs, the community school district Early Childhood Community Coordinating Committee, and the Early Childhood Resource and Information Center. It is hoped that this document will assist planners and policy makers in responding to the decade of change that lies ahead, as well as inspire commitment to the development of young children and their families.

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APPENDIX A

ADVERTISEMENTS OF NANNY/CHILD CARE LISTINGS

FRIDAY, AUGUST 11, 1989

JOBS WANTED

IRISH NANNY, experienced, excellent refs, newborn & infant. Call [illegible]

SPANISH GIRL, vuh refs looking for full-time position to take care of a baby or house cleaning. Weekends too.

IRISH GIRL seeking jobs in child care, housekeeping or cleaning. Experienced, good references

HELP WANTED

Loving, responsible person to care for 4-month infant in my home, 8:30 a.m.-5:00 p.m., p/t, $40.00 per day. References required. (718)

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FRIDAY, OCTOBER 6, 1989

Child Care

NANNIES FROM NORTHWEST - Interviewed w/references checked in OREGON. $150 plus wk. Agency is licensed, bonded & insured in NY/Oregon. Call "MOTHER KNOWS BEST" ( ) . NY.

FRIDAY, OCTOBER 27, 1989

SITUATION WANTED

Experienced babysitter seeks steady employment in Sunnyside area only. References. Call after 8 p.m.

BABYSITTER AVAILABLE SERVING Breakfast, lunch, mid-day snacks, yard for outdoor play. Transportation available if needed. References (718) (D-4/4).

FRIDAY, NOVEMBER 10, 1989

SITUATION WANTED

Experienced babysitter seeks steady employment in Sunnyside area only. References. Call after 8 p.m.

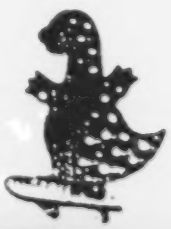
Early childhood

GOOD DAY CARE FOR YOUR BABY
IN MY SUNNYSIDE HOME. (39th st.)
CHEAP AND SAFE!
TRUST ME!
CALL ME: ( )

(from 4 months old babys)

153

Open house:
10am-12noon
5pm-6pm



CHILD CARE

AFFORDABLE CHILDCARE In my home. Great environment 267-1812 (H)

EXPERIENCED DAYCARE PROVIDER AVAILABLE: Toddlers and pre-schoolers welcome. In my home. Structured and unstructured daily activities. Please call (718) (10/24)

Experienced mother of two looking to watch your child in my home in the Sunnyside-Woodside area. M/F P/T F/T. Reference upon request ( )

THE WOODSIDE HERALD, FRIDAY, OCTOBER 26, 1990

SITUATION WANTED

Babysitter/companion available. Mature, English speaking, non-smoker. Sunnyside area only. (718) evenings.

APPENDIX B

TELL THE PRESIDENT: YOUR FAMILY MATTERS SURVEY

Tell the President Your Family Matters

This survey of opinions of women and men on child-care and family issues is being published simultaneously by 20 national magazines. Sponsored by the nonpartisan advocates, Child Care Action Campaign and the Great American Family Tour, this is the largest magazine survey of its kind. Lifetime Television, which is underwriting the survey, will premier its special documentary *Hush Little Baby: The Challenge of Child Care* on January 23 at 9 P.M. ET/PT. The results of this important survey will be presented to President Bush in May.

What Do You Think?

1. Do you think the federal government pays enough attention to child care and other family concerns? ☐ Yes ☐ No

2. Do you think family issues should be a top priority for the President and Congress? ☐ Yes ☐ No

3. Are your child-care concerns with (check the three most important):
- ☐ Finding care
- ☐ Cost
- ☐ Reliability
- ☐ Safety
- ☐ Making emergency arrangements
- ☐ Quality of care

4. Check the statement(s) you agree with:
- ☐ It is the sole responsibility of parents to choose, find and pay for child care.
- ☐ While the choice of child care should be left to parents, government should help make good, affordable child care available for all children who need it.
- While the choice of child care should be left to parents, businesses should help make good, affordable child care available for all children who need it.

5. Please circle how much you agree or disagree with each of the following statements—or if you have no opinion, check the box.

The federal government should develop policies to make child care more affordable.	1	2	3	4	☐
State governments should develop policies to make child care more available and affordable.	1	2	3	4	☐
Employers should develop policies to make child care more available and affordable.	1	2	3	4	☐
The federal government should set minimum standards for child-care centers, including health and safety standards and staff-to-child ratios.	1	2	3	4	☐
The federal government should provide money to help parents pay for child care.	1	2	3	4	☐

6. Should every mother and father have the right to take a leave from work, without fear of losing his or her job, to take care of a newborn or newly adopted child, or a seriously ill child or parent?
- ☐ Yes — Answer Q.7
- ☐ No — Skip to Q.8
- ☐ No opinion — Skip to Q.8

If yes, should this leave be:
- ☐ Fully paid
- ☐ Partially paid
- ☐ Unpaid
- ☐ Don't know

8. Poor single parents with young children should have:
- ☐ Child care, so they can take advantage of a work opportunity or job-training program
- ☐ Financial support, so they can stay home with preschool children
- ☐ Only those benefits that other parents get

9. Number of children under 18 living in your home:
- ☐ None — Skip to Q.13
- ☐ One
- ☐ Two
- ☐ Three
- ☐ Four or more

(One–Four or more: Answer Q.10)

10. In what age categories? (Check all that apply)
- ☐ Under 2
- ☐ 2 - 5
- ☐ 6 - 9
- ☐ 10 or older

11. How many require child care services?
- ☐ None — Skip to Q.13
- ☐ One
- ☐ Two
- ☐ Three
- ☐ Four or more

(One–Four or more: Answer Q.12a.)

12a. What do you pay for child care per week?
- ☐ Nothing
- ☐ Less than $50
- ☐ $51 to $100
- ☐ $101 to $200
- ☐ More than $200

12b. If you pay for child care, does your family use the current dependent care tax credit (DCTC) when filing your income taxes? ☐ Yes ☐ No

Who Are You?

13. Age
- ☐ Under 25
- ☐ 25 to 29
- ☐ 30 to 35
- ☐ 36 to 45
- ☐ 46 to 59
- ☐ 60 and over

14. Sex ☐ Male ☐ Female

15. Marital Status
- ☐ Married
- ☐ Widowed
- ☐ Separated
- ☐ Living with partner
- ☐ Divorced
- ☐ Single

16. Do you work for an income? (If "Yes" how many hours?)
- ☐ Yes, less than 15 hours a week
- ☐ Yes, 15 to 34 hours a week
- ☐ Yes, 35 or more hours a week
- ☐ No, do not work for an income

17. Is your household income (before taxes):
- ☐ Less than $20,000
- ☐ $20,000 to $34,999
- ☐ $35,000 to $49,999
- ☐ $50,000 to $74,999
- ☐ $75,000 or more

18. If you are married, does your spouse work for an income? ☐ Yes ☐ No

19. What is your ZIP code (USA)?.....

APPENDIX C

EARLY CHILDHOOD SERVICE REFERRAL FORM

Case ID:_____ EMERGENCY_____

Date Received_____ By (Name)_____
Phone ___ Mail ___ In Person ___

Constituents Name_____ Tel.#_____

Address_____ Apt.#____ Zip_____

Type of service needed: Child's age (if applicable)_____

__CCI&R __EE __CA __H __ES

Description:

(Cont. on back)

Sent to: Date_____ Agency_____ Category_____
(Attach form, letter, etc. for each agency involved)

If referred by phone, add: Person/Office:_____
Tel.#_____
Constituent Contact (Dates, etc.)_____

Action Taken: (Provide a running account of all relevant agency actions and Board follow-up, including dates; attach any correspondence, memos, etc.)

Agency Response: Date_____ Date of Final Resolution_____
Comments:
1. How did you find out about the Community Board?
2. How do you get information on early childhood services?
3. Are you willing to travel outside of the area for service?

BEST COPY AVAILABLE

APPENDIX D

REFERRAL LOG

DATE	NAME	ADDRESS	PHONE	CASE	REQUEST	AGENCY	FOLLOW-UP

APPENDIX E

WEEKLY JOURNAL

___/___/___

Objectives for service referral:

Overview of Requests/Referrals/Workshops/Special Events:

Planned Follow-up:

Comments:

SUCCESSES:

CONCERNS:

APPENDIX F

ID# _____

FORM LETTER

158

COMMUNITY BOARD NO. 2

43-31 39th Street

Sunnyside, N.Y. 11104

DATE _____

Dear :

I am pleased to send you the following items in response to your request for early childhood service information:

() Press Release, flyer
() Voucher information
() Day Care Center List
() Early Childhood Services List
() Spanish language translation
() Activities information
() Advocacy information
() Other _____

_____

Thank you for calling. If you have any further need for assistance or information, please don't hesitate to call.

Sincerely,

718-361-0750

APPENDIX G

LETTER OF AGREEMENT

COMMUNITY BOARD No. 2

43-31 39th Street
Sunnyside, New York 11104
(718) 361-0750

"SERVING THE COMMUNITIES OF LONG ISLAND CITY, SUNNYSIDE, WOODSIDE AND MASPETH"

December 5, 1990

Dear Early Childhood Service Provider:

We have found that families in our community district have great difficulty getting early childhood services and information. In many instances, they simply do not know that there are agencies out there to help. To assist families in negotiating services from the city-wide early childhood service network, we are offering community-based referrals and information. Our plan to better serve families with young children requires that we gain the support and cooperation of agencies such as yours.

On behalf of the community, I would like to invite you to participate in a project to provide comprehensive referrals to families in need of early childhood services. We ask that you (a) place our community board on your mailing list for your agency information (if it is not already on), and (b) accept referrals for "prompt action" from our office. Together, we can increase the efficiency with which local needs are met, while increasing public awareness of these vital services. At a time when budgets are being cut, and there are few plans to develop more services, we need to enhance our interagency communication and contact to maximize positive outcomes.

Please complete the attached response form, if you are interested in participating. This will let us know that you support the project, and are willing to receive referrals and requests for assistance from our office. If we are successful, we may be able to significantly <u>increase the number of families served, and promote interagency collaboration for more comprehensive service delivery</u>.

Many thanks for your cooperation.

BEST COPY AVAILABLE

Community-Based Referral Network
for Families in Need of Early Childhood Services

R E S P O N S E F O R M

_____

_____

Organization Name _____

_____

Contact Person _____
Title _____

Complete Address (Street No., Room#, Zip) _____
_____
_____

Telephone # ( ) _____
Fax# _____

_____ YES, our agency would like to participate.

_____ NO, we will not participate, but we will put you on our mailing list.

_____ Other comments/questions _____

_____

Signature _____
Date _____

This agreement is intended to bridge the gaps in early childhood services for the mutual benefit of our community district and your agency.

Thank you for any support you can give this project.

Sharon M. Cadiz
Youth Coordinator, CB#2
43-31 39th Street
Sunnyside, NY 11104
(718) 361-0750

APPENDIX H

COVER SHEET

COMMUNITY BOARD No. 2

43-31 39th Street
Sunnyside, New York 11104
(718) 361-0750

"SERVING THE COMMUNITIES OF LONG ISLAND CITY, SUNNYSIDE, WOODSIDE AND MASPETH"

N O T I C E

PLEASE PASS THE ENCLOSED INFORMATION ALONG THROUGH YOUR----

( ) NEWSLETTER/BULLETIN

( ) BULLETIN BOARD

( ) ANNOUNCEMENTS

( ) WORD OF MOUTH REFERRAL ("TELL A FRIEND")

( ) INFORMATION NETWORK

THANK YOU.

CLAIRE SHULMAN
PRESIDENT

(718) 520-3220
TDD (718) 520-2990

CITY OF NEW YORK
OFFICE OF THE
PRESIDENT OF THE BOROUGH OF QUEENS
120-55 QUEENS BOULEVARD
KEW GARDENS, NEW YORK 11424

April 19, 1991

Ms. Sharon Cadiz
Youth Coordinator
Community Board No. 2
43-31 39th Street
Sunnyside, NY 11104

Dear Ms. Cadiz:

Thank you for your participation in the preparation of the *1990 Queens Strategic Policy Statement.

Following the public hearing on October 25, 1990, the document was revised to include your comments and testimony. As required by the City Charter, the final Queens Strategic Policy Statement was presented to the Mayor and the City Council.

I am now pleased to issue the official 1990 Queens Strategic Policy Statement. The City's fiscal condition and the size of the document preclude mailing. However, beginning on April 22, 1991, copies may be obtained at Queens Borough Hall in Room 226 between the hours of 9:00 a.m. and 5:00 p.m..

Sincerely,

Claire Shulman

CLAIRE SHULMAN
President
Borough of Queens

CS/pc

* Expand and Enhance Child Care Services

The following measures are recommended to increase the number of slots and enhance existing child care services in the borough:

- Expand Services to All Eligible Families

The number of vouchers issued to families in communities that lack not-for-profit providers and ACD centers should be increased. The city should implement its plans to develop additional child care slots in the borough.

OFFICE OF COMMUNITY SUPERINTENDENT
DISTRICT 30
BOARD OF EDUCATION
36-25 Crescent Street
Long Island City, New York 11106
(718) 729-6380

RECEIVED
MAY 16 91
COMMUNITY PLANNING BOARD #2

165

DR. ANGELO GIMONDO
Community Superintendent

May 8, 1991

Ms. Sharon Cadiz
Youth Coordinator
Community Planning Board #2
43-31 39 St.
Sunnyside, New York 11104

Dear Ms. Cadiz:

We look forward to having you join us on May 10, 1991 to address the members of the Early Childhood Community Coordinating Committee on the topic of "The Referral Procedure for Early Childhood Services."

Over a short period of time, you have collected a plethora of useful information which you have been so kind to share with many of us.

Thank you for your sense of commitment to early childhood and to the community at large.

Sincerely yours,

Andrea L. Pack
Supervisor of Early
Childhood Education

ALP/er

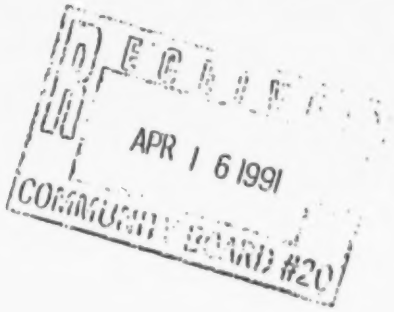
APPROVED:

Angelo Gimondo, Community Superintendent

165

SUNNYSIDE REFORMED CHURCH

A Community Church Established in 1896



April 12, 1991

Sharon M. Cadiz
Youth Coordinator
COMMUNITY BOARD TWO
43-31 39th Street
Sunnyside, N.Y. 1104

Dear Ms. Cadiz,

Thank you for visiting us on Monday morning. I am sorry that I did not have time to visit with you more fully. When I was told that we were having open house, I did not realize that you would be coming and would want to talk to me. I would have definitely kept the time open for you. As it was, I could not leave the people I was with until almost 11:00 P.M. Please forgive me if I misunderstood about your visit.

I hope you found some answers to your questions about our program. We are in the process of evaluating it before it closes for the summer. We hope to open again in October for three mornings a week.

Thank you again for your interest and support. We appreciate all that you are doing.

Sincerely,

Judith Gorsuch
Pastor

WOODSIDE INTERMEDIATE SCHOOL

I.S. 125 Q

46-02 47th AVENUE
WOODSIDE, NEW YORK 11377
(718) 937-0320

PRINCIPAL

PAUL S. GOTKIN

FEB 2 8 1991

ASSISTANT PRINCIPALS

ALAN GINSBERG
SALVATORE RESTIVO
DANIEL RODRIGUEZ
DONALD ZIMMET
PAULINE SIMMONS

C.I.T.

ANTHONY DELUCA

February 25, 1991

Queens Community Board #2
43-31 39th Street
Sunnyside, New York 11104

Attn: Ms. Sharon Cadiz, Director of Youth Services

Dear Sharon:

Thank you for the interesting and informative presentation that you gave on Friday, February 22nd. Your audience was delighted to learn of the many resources available in Community Board #2. Several parents have called me on the telephone to say how much they enjoyed your workshop and the wealth of literature that you gave them.

Your efforts are helping to make this a better community. Keep up the good work!

Sincerely yours,

Geraldine Durán

Geraldine Durán
Parent Facilitator

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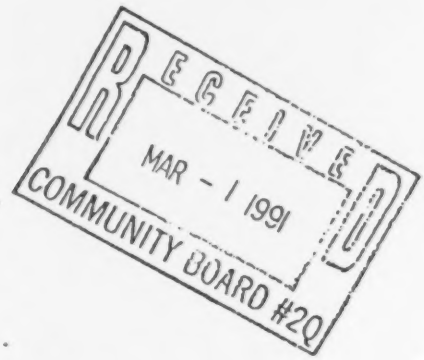
2/27/91



Mrs. Sharon Cadiz
Youth Coordinator
Community Board 2
43-31 39 St.
Sunnyside, N.Y. 11104

Hi Sharon;

Hope this finds you well.

I spoke to the Executive Director, Suzanne Y. Jones, of the Single Parent Resource Center and she would like to receive your directory.

They provide very good services and would probably like to be in the directory the next time you put one out.

Marc Leavitt is a member of the Board of Directors and brought Suzanne to a Kiwanis meeting.

Have a happy spring!

Best Wishes,

Joanne M. Billharz

February 19, 1991

Dear Sharon,

First I want to say that I benefited greatly from the Early Childhood meeting last February 11th. I am looking forward to the next meeting.

Secondly, I've enclosed several copies of my neighborhood newsletter. Also I found an article in the February '91 issue of Parents magazine which you may be interested in. I am also returning two newspaper photos that fell out of the Pre-K Today magazine you gave to me. I thought you might need them for an article.

Keep in touch & Thanks,

Eileen Korn

Eileen Korn

Astoria Long Island City N.A.A.C.P.

FAMILY DAY CARE FUND INC.

170

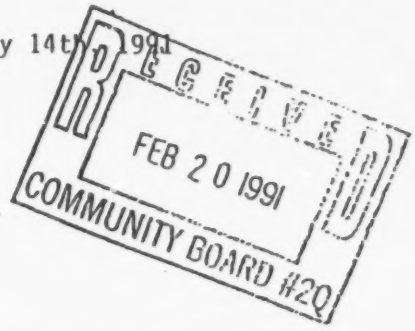
4-05 ASTORIA BOULEVARD
LONG ISLAND CITY, N.Y. 11102

TELEPHONE
(718) 278-5400

VERONICA A. HIBBLER
DIRECTOR

LEROY GHIPPEH
CHAIRMAN BOARD OF DIRECTORS

February 14th, 1991



Sharon Cadiz
Youth Coordinator
Community Board # 2
43-31 39th Street

Dear Sharon,

Thank you again for the information and names of the parties who are interested in participating in our Family Day Care program.

We hope to have ourbrochures to you before the next Network meeting.

Enclosed is the information I am sharing with you regarding the "Temporary Commission on Early Childhood and Child Care Programs" we spoke of yesterday.

Perhaps we can setup a brief meeting regarding the needs of community in this area. We certainly need as much positive input as possible.

Hope to see or speak with you soon.

Respectfully,

Veronica

Veronica Hibbler
Director

VH;ig
CC;File

January 21 1991

Dear Sharon,

I am writing to express my appreciation for the invitation you sent for your meeting on January 14, the nice way you treated Danielle (and myself, of course), and the subsequent mailing. I've learned since the meeting that application for any grants has to be conducted directly by Mayerd Town Hall, and I will not be involved in any aspect of that. However thank you for that material. Please continue to send me any other literature and notifications of upcoming meeting events, etc. Sincerely, Arlene Mangano

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APR 18 1990
COMMUNITY BOARD #2Q

April 16th, 1990

Sharon M. Cadiz
Youth Coordinator
Community Board 2
43-31 39 st.
Sunnyside, N.Y. 11104

Dear Sharon:

Just a quick note to thank you for inviting me to the April 4th meeting at LaGuardia College.

I found the information which was shared and your leadership wonderful! Communication between youth leaders and advocates is indispensable if the children are really going to be served.

I do hope that a directory of those serving the is possible to produce in the near future.

Thanks again,

Sincerely,

Joanne M. Billharz

The City of New York

DEPARTMENT OF HEALTH

125 WORTH STREET NEW YORK, NY 10013

175

Bureau of Day Care
90-37 Parsons Blvd., 4th Fl.
Jamaica, N.Y. 11432
718-262-5549

March 16, 1990

RECEIVED
MAR 23 1990
COMMUNITY BOARD #2Q

Sharon Cadiz, Youth Coordinator
Community Board #2
43-31 39th Avenue
Sunnyside, New York 11104

Dear Ms. Cadiz,

Thank you for your invitation to a special meeting for Child Care Advocates during the Week of the Young Child. The Bureau of Day Care is also sponsoring activities during the Week of the Young Child. I am therefore unable to attend Community Board #2's meeting on April 4, 1990.

If you plan other meetings around the topic of young children, please continue to inform me.

Sincerely,

Gwendolyn Clinkscales
Early Childhood Education Consultant

/bl

APPENDIX I

LETTERS/RESPONSES TO IMPLEMENTATION

Early Childhood Services: Future of Community

The week of the young child (April 1-7) was celebrated in Community Board Two with a variety of special activities. The general theme for the week was, "Quality Child Care: Good Beginnings Never End." Parent workshops were conducted on the topics of stress management; health nutrition, and fitness for the new mother; how to start a playgroup; and ideas for creating a stimulating environment for preschoolers.

A special strategic planning meeting (April 4th, at LaGuardia Community College) was the highlight of the week's activities. Planners and service providers from all over the city came together to discuss ways to meet early childhood needs in the '90s.

An initial activity of the meeting called for participants to develop a list that corresponded to the needs of the newborn. A picture of a newborn was used to capture the importance of thinking concretely about what can be done for a single newborn, rather than thinking abstractly about thousands who may easily become the anonymous victims of infant mortality, child abuse, and school failure.

The collective list included good prenatal care; stable, nurturing home environment; language stimulation; support for cognitive, social, emotional, and physical development; quality substitute care; and the basic necessities of food, shelter and clothing. Corresponding services to meet these needs were also discussed. Final recommendations pointed to a broad safety net of care and services for families and young children, approaching a universal system that is the result of comprehensive, community-based, interagency collaboration.

Support of the family and community became a critical element of all plans and goals. The family was described as a major socializing institution, needed for the teaching of values. The community was regarded as a basic unit of society that integrates social, economic and political reality for an improved quality of life.

Strategies and action plans emphasized positive thinking and "can do" steps. Networking among early childhood service providers was seen as highly beneficial in meeting mutual needs. For example, one child care program coordinator had children he could not accommodate in his program and the suggestion was made that perhaps another program may have space. Information sharing, parent involvement, and empowerment of families were also part of action plans. The idea of a "continuum of service" from birth to age 20; a concept from the Minessota Youth Coordinating Board, and health tracking from birth were seen as ways to support healthy development.

Sharon Cadiz, Youth Coordinator for Community Board Two, organized the meeting and reported on district needs. She gave a description of the community and a demographic profile. In addition, she cited the various influences that will have an impact on planning efforts in the '90s, including private sector involvement, pluralism, the gradual "graying" of the city's population, immigration, the census, and the needs of the disabled. Four key factors were described as contributing to the current inadequacies in care and other related services: inequity, fragmentation, uneven funding patterns, and a crisis orientation. Participants were urged by advocate Rhonda Carless Smith (Child Care, Inc.) to express concerns regarding youth and child care funding currently being discussed in the city council.

The following agencies were represented at the meeting: Early Childhood Development Corporation, Education Equity Concepts, Early Steps, Dept. of Parks and Recreation, Sunnyside Kiwanis, Bank Street College, Community Board Two, LaGuardia Community College, Sunnyside Community Services, Agency for Child Development, LaGuardia's Early Childhood Learning Center, Adventureland Preschool, St. Teresa's, Child Care, Inc. and Astoria NAACP Family Day Care. For more information or details on the meeting and the workshops, please call Sharon Cadiz at Communit Board Two, (718) 361-0750.

Forum on 'family'

A mini-conference on "Family Matters" for community families will be held this Saturday (June 16th) at St. Teresa's Parish Center 50-20 45th St. Woodside, between 9 a.m. and 12 p.m. Informational handouts, discussion and guest speakers will provide families with helpful strategies to cope with matters related to modern living such as stress, childrearing, health and drug-free lifestyles. In a continuing effort to support community families and the healthy development of youth, this mini-conference is being sponsored in cooperation with the Youth Services Planning Committee of CPB 2, the New York City Department of Youth Services and St. Teresa's. Families are encouraged to attend. For further information, contact: Sharon Cadiz at 361-0750.

Early Childhood Services

In order to assist families in need of early childhood service information, Sharon Cadiz, youth coordinator of Community Board 2, urges parents to call for information and referrals to child care, evaluation, health care, and family support services.

Parents who are at home can telephone during regular office hours between 9 a.m. and 5 p.m. Working parents are invited to call 361-0750 between 6 p.m. and 9 p.m. on Tuesdays.

To facilitate effective handling of information requests that come in on the message machine on Tuesday evenings, parents are asked to give their: Name, address (with zip code), daytime telephone number, and a brief message about what information or services are needed.

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Meeting Early Childhood Needs In the 1990s: Family Matters!

In the summer of 1989, the Child Care Campaign (99 Hudson St., suite 1233, New York, N.Y. 10013) published the results of their national family matters survey. A survey was printed in 21 magazines. Thousands of people from around the nation responded, and their message was clear: early childhood services such as child care are a number one priority.

Child Care Action Campaign explained that "there is an urgent need for increased leadership on behalf of families." Sixty-five percent of the respondents feel that the government should help improve child care and make it more affordable for *all* children. Seventy-five percent of fathers and 84% of mothers with children under the age of two think support for family issues should be a legislative priority. Quality, availability, parental leave and business involvement in child care were other concerns expressed by the majority of families.

Community Board 2 is anxious to assist families with information that will help them in negotiating realted city services, support services, child care, health care, and special needs services.

Families can help us find out more about family needs in Community Board 2. In an effort to survey early childhood service needs, families are urged to call the Community Board Office (361-0750) on Thursday, March 15th between 6 p.m. and 9 p.m. Families who wish to respond should leave a message indicating the type of service(s) they need. The Community Board is in the process of updating their youth service directory, and would appreciate community input on existing service needs in order to tailor it to local needs. People who telephone should indicate if the services are for new Americans, single parents, teen parents, or two parent working families.

For more information on available services, upcoming plans for meeting early childhood service needs, as well as activities for Week of the Young Child" (April 1-7), contact Sharon M. Cadiz, Youth Coordinator CB 2 at 361-0750 between 9 a.m. and 5 p.m., Monday through Friday.

WOODSIDE HERALD, FRIDAY, JULY 26, 1991

CB 2 Deals With Local Early Childhood Needs

by Michael Ephtimiades

Community Board 2 recently completed a comprehensive referral procedure for local families in Long Island City, Sunnyside, and Woodside who are in need of early childhood services information. The results of the Community Board 2 study concur with the 1989 National Family Matters Survey which concluded that child care and related services are a number one priority among families.

The eight-month project was undertaken by Sharon Cadiz, Community Board 2 Youth Coordinator. Community Board 2 received numerous calls requesting information on early childhood services. The program successfully supported area families in locating services and meeting the developmental needs of children who ranged in age from infants to 5 years old.

A total of 80 families were assisted through the project. Of this total, 43 of the families requested service information for preschoolers between the ages of three and five; 20 for toddlers; and 17 for infants. The largest percentage of calls came from the Woodside community. Elaborating Cadiz said, "The youngest child for whom service information was requested was two months-old. Seventy-six calls came in for child care information and 18 for family support services. Many requested more than one type of service each time."

Parents told Community Board 2 that they needed help with locating services. According to Cadiz, when parents asked what their source of early childhood information was, they responded that they did not have any. Cadiz added that the project responded to such a need. She stated that it also addressed the lack of comprehensive, coordinated community based referrals; family isolation; the limited availability of services/information; the restrictive eligibility requirements for public services; and cultural attitudes that reinforced resistance to asking for help.

By the conclusion of the Community Board 2 project, families were saying that they wanted elected officials to be more responsive to their needs providing increased services, scholarships, financial aid or subsidies in programs that are safe, affordable and accessible.

As an outgrowth of the project, an early childhood services directory has been compiled. Anyone desiring further information should call Sharon Cadiz at (718) 361-0750.

Ledger-Reporter-Journal-News July 25, 1991

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Young Children ...

(Continued from Page 1)

their children from birth to age five.

A total of 80 families were assisted through the project and countless more were helped by those who called in and subsequently shared the information with friends, relatives and neighbors. The youngest child for whom service information was requested was 2-months-old. Seventy-six calls came in for child care information and 18 for family support services. Many requested more than one type of service each time.

The largest number of calls came from the Woodside area. Forty-three of the families requested service information for pre-schoolers between 3 and 5; twenty for toddlers; and seventeen for infants.

Overwhelmingly, parents said they needed help with locating services and when asked what their source of early childhood information was, they said they didn't have any. The project responded to this, as well as the lack of comprehensive, coordinated, community-based referrals; family isolation; limited availability of services/information; restrictive eligibility requirements for public services; and cultural attitudes that reinforced resistance to asking for help. By the end of the project, families were saying that they wanted leaders to be more responsive to their needs... providing increased services, scholarships, financial aid, or subsidies, in programs that are safe, affordable and accessible.

As an outgrowth of the project, an early childhood services directory has been compiled. For more information, call (718) 361-0750.

Young Children Matter To Board Two

Sharon Cadiz, Youth Coordinator of CB 2, has recently completed the implementation of a comprehensive referral procedure for local families in need of early childhood services information. The results concur with the national "Family Matters" survey done in 1989 which concluded that child care and related services are a number-one priority among families.

The eight-month project began with outreach publicizing the referral procedure. In no time, calls started coming in requesting information. The "warmline" format proved very beneficial in supporting area families in locating services and meeting the developmental needs of

(Continued on Page 7)

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